

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

REPUBLICAN PARTY OF LOUISIANA

ADDRESS (number and street) ▼

C/O RED CURVE SOLUTIONS

500 CUMMINGS CENTER, SUITE 4400

☐ Check if different than previously reported. (ACC)

BEVERLY

MA

01915

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00187450

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☒ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

LA

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2014

through

M M M / D D D / Y Y Y Y Y Y
12 / 26 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. DANIEL G. KYLE

Signature of Treasurer

Mr. DANIEL G. KYLE

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

REPUBLICAN PARTY OF LOUISIANA

Report Covering the Period: From: M M / D D / Y Y Y Y Y 11 / 17 / 2014 To: M M / D D / Y Y Y Y Y 12 / 26 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		17403.15
(b) Cash on Hand at Beginning of Reporting Period.....	126080.65	
(c) Total Receipts (from Line 19)	1660036.81	3178166.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1786117.46	3195569.32
7. Total Disbursements (from Line 31)	1583106.39	2992558.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	203011.07	203011.07
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	3800.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

REPUBLICAN PARTY OF LOUISIANA

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	6	/	2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	108671.67	254269.25
(ii) Unitemized	113934.57	210399.17
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	222606.24	464668.42
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	22625.40	54417.71
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	245231.64	519086.13
12. Transfers From Affiliated/Other Party Committees.....	1406965.70	2448426.53
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	3.20
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	13557.56
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	7839.47	197092.75
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	7839.47	197092.75
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1660036.81	3178166.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1652197.34	2981073.42

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	2847.61	113073.68
(ii) Non-Federal Share.....	10712.43	423686.24
(b) Other Federal Operating Expenditures	905022.20	1396297.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	918582.24	1933057.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	7287.58	7287.58
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	571.00	1671.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	571.00	1671.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	656665.57	1050542.55
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	656665.57	1050542.55
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1583106.39	2992558.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1572393.96	2568872.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	245231.64	519086.13
34. Total Contribution Refunds (from Line 28(d))	571.00	1671.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	244660.64	517415.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	907869.81	1509370.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3.20
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	907869.81	1509367.68

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: F3XA

Transaction ID :

This report is amended to include two transfers from the nonfederal account for allocated Federal/Nonfederal activity. These transfers were previously not reported due to a staff miscommunication. Cash on hand will be adjusted accordingly. Our Committee has reviewed and improved our process to prevent these discrepancies in the future. The report is amended to include the following in-kind contributions: Maryland Republican Party, 12/18/14, \$2,646.90 & Michigan Republican Party, 12/18/14, \$27,800.41. Cash on hand is not effected

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JESSE ADAMS

Mailing Address 6306 PRYTANIA ST

City

NEW ORLEANS

State

LA

Zip Code

70118

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2014

Transaction ID : SA11AI.20860

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. MS. MARIA ALESSANDRA

Mailing Address 4617 SENAC DR

City

METAIRIE

State

LA

Zip Code

70003

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2014

Transaction ID : SA11AI.21819

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. MR. ROBERT AMBROSE

Mailing Address 1415 7TH ST

City

LAKE CHARLES

State

LA

Zip Code

70601

FEC ID number of contributing
federal political committee.

C

Name of Employer

CPSB

Occupation

SUBSTITUTE TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2750.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 26 / 2014

Transaction ID : SA11AI.20844

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

210.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 187

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. ROBERT AMBROSE

Mailing Address 1415 7TH ST

City

LAKE CHARLES

State

LA

Zip Code

70601

FEC ID number of contributing
federal political committee.

C

Name of Employer

CPSB

Occupation

SUBSTITUTE TEACHER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2775.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			26			2014			

Transaction ID : SA11AI.22434

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. DANA ANDERSON

Mailing Address 100 FALL CREEK ROAD

City

LAWRENCE

State

KS

Zip Code

66049

FEC ID number of contributing
federal political committee.

C

Name of Employer

MACERICH

Occupation

REAL ESTATE INVESTMENT TRUST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			24			2014			

Transaction ID : SA11AI.24524

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. MR. DEREK BABCOCK

Mailing Address 13600 QUAIL RUN AVE

City

DENHAM SPRINGS

State

LA

Zip Code

70726

FEC ID number of contributing
federal political committee.

C

Name of Employer

BABCOCK INSURANCE

Occupation

OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2014			

Transaction ID : SA11AI.19644

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

350.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. LEE M BASS
 Mailing Address 201 MAIN ST
 STE 2700

City	State	Zip Code
FORTH WORTH	TX	76102

FEC ID number of contributing federal political committee.

C

Name of Employer

LEE BASS INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2307.69

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2014

Transaction ID : SA11AI.26553

Amount of Each Receipt this Period

2307.69

Full Name (Last, First, Middle Initial)

B. MR. JOHN BECKER

Mailing Address 235 N ELM GROVE RD UNIT F

City	State	Zip Code
BROOKFIELD	WI	53005

FEC ID number of contributing federal political committee.

C

Name of Employer

JOHN D BECKER & ASSOC ESTATE
PLANNING

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2014

Transaction ID : SA11AI.20029

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. MR. ROBERT C BERTHELOT

Mailing Address 255 MARINA RD

City	State	Zip Code
CHALMETTE	LA	70043

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PROPERTY MGR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2014

Transaction ID : SA11AI.22420

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2432.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. ROBERT BOYD

Mailing Address 53 PENNSYLVANIA WAY

City State Zip Code
 NORTH BRUNSWICK NJ 08902

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : SA11AI.24750

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. LUCILLE BRIAN

Mailing Address 448 TOPAZ ST

City State Zip Code
 NEW ORLEANS LA 70124

FEC ID number of contributing
federal political committee.

C

Name of Employer

LOUIS D HAEUSER INVESTMENTS

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 01 / 2014

Transaction ID : SA11AI.21017

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. DAVID BUSH

Mailing Address 13630 CR 100

City State Zip Code
 BIG PRAIRIE OH 44611

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : SA11AI.24130

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 187
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. DOUGLAS CAMPBELL

Mailing Address 676 GOPHER WALK WAY

City State Zip Code
 SANIBEL FL 33957

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 09 / 2014

Transaction ID : SA11AI.26318

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. MINNIE CAPPEL

Mailing Address 5742 TANGLE CIRCLE LN.

City State Zip Code
 HOUSTON TX 77057

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : SA11AI.24285

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. MR. CHRIS CARROLL

Mailing Address 3811 MCCOY DRIVE, BUILDING D

City State Zip Code
 BOSSIER CITY LA 71111

FEC ID number of contributing
federal political committee.

C

Name of Employer

CARROLL COMPRESSION

Occupation

VICE-PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 04 / 2014

Transaction ID : SA11AI.24798

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
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 Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR PAUL H CASSINGHAM

Mailing Address 5713 BRIGHTON PL

City	State	Zip Code
NEW ORLEANS	LA	70131

FEC ID number of contributing federal political committee.

 Name of Employer
 ENTERGY SERVICES, INC.

 Occupation
 CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	03	/	2014

Transaction ID : SA11AI.22261

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. NATALIE CHAPMAN

Mailing Address 2299 STERLINGTON RD APT B205

City	State	Zip Code
MONROE	LA	71203

FEC ID number of contributing federal political committee.

 Name of Employer
 INFORMATION REQUESTED

 Occupation
 INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2014

Transaction ID : SA11AI.20872

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. PHILIP CHIASSON

Mailing Address 169 E 156TH ST

City	State	Zip Code
GALLIANO	LA	70354

FEC ID number of contributing federal political committee.

 Name of Employer
 RETIRED

 Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2014

Transaction ID : SA11AI.20875

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. ARTHUR B CHOATE

Mailing Address 1390 S DIXIE HWY SUITE 2221

City	State	Zip Code
CORAL GABLES	FL	33146

FEC ID number of contributing federal political committee.

Name of Employer

ARTMARINA INC

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2014

Transaction ID : SA11AI.22236

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. MR. WALTER H CLAIBORNE III
Mailing Address 14297 CLAIBORNE RD
BELLA VISTA PLANTATION

City	State	Zip Code
BATCHELOR	LA	70715

FEC ID number of contributing federal political committee.

Name of Employer

SELF-EMPLOYED

Occupation

REAL STATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2014

Transaction ID : SA11AI.20689

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. MRS WM H CLARK

Mailing Address 3716 MAPLEWOOD AVE

City	State	Zip Code
DALLAS	TX	75205

FEC ID number of contributing federal political committee.

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2014

Transaction ID : SA11AI.21814

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. ANDRE COMEAUX

Mailing Address P. O. BOX 53102

City

LAFAYETTE

State

LA

Zip Code

70505

FEC ID number of contributing
federal political committee.

C

Name of Employer

REGIONS INSURANCE GROUP

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

11 / 20 / 2014

Transaction ID : SA11AI.19424

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. MR. ANDRE COMEAUX

Mailing Address P. O. BOX 53102

City

LAFAYETTE

State

LA

Zip Code

70505

FEC ID number of contributing
federal political committee.

C

Name of Employer

REGIONS INSURANCE GROUP

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

12 / 17 / 2014

Transaction ID : SA11AI.19592

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. MR. ARCHIE CORDER

Mailing Address 5501 W. ESPLANADE AVE.

City

METAIRIE

State

LA

Zip Code

70003

FEC ID number of contributing
federal political committee.

C

Name of Employer

CC SALES CO.

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

12 / 09 / 2014

Transaction ID : SA11AI.25031

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

X	11a		11b		11c		12		
	13		14		15		16		17

REPUBLICAN PARTY OF LOUISIANA

FEC Schedule A (Form 3X) Rev. 02/2003

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. DOUGLAS E DICKSON

Mailing Address 223 ELIZABETH ST

City

YORKVILLE

State

IL

Zip Code

60560

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 02 / 2014

Transaction ID : SA11AI.21028

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. CYNTHIA DORE

Mailing Address 1017 NANTUCKET DR UNIT D

City

HOUSTON

State

TX

Zip Code

77057

FEC ID number of contributing
federal political committee.

C

Name of Employer

RADJET SERVICES US INC

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1825.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2014

Transaction ID : SA11AI.19429

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. CYNTHIA DORE

Mailing Address 1017 NANTUCKET DR UNIT D

City

HOUSTON

State

TX

Zip Code

77057

FEC ID number of contributing
federal political committee.

C

Name of Employer

RADJET SERVICES US INC

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 17 / 2014

Transaction ID : SA11AI.19590

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. DIANE FIELD

Mailing Address 29 OLD OAK LN

City
GULFPORT

State Zip Code
MS 39503

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2014

Transaction ID : SA11AI.22815

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. MR. MAX E FOOTE JR

Mailing Address PO BOX 1208

City
MANDEVILLE

State Zip Code
LA 70470

FEC ID number of contributing
federal political committee.

C

Name of Employer

MAX FOOTE CONSTRUCTION CO.

Occupation

CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA11AI.20720

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. THOMAS C FRENCH JR

Mailing Address 5015 PARKHOLLOW DR

City
BATON ROUGE

State Zip Code
LA 70816

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA11AI.20565

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MRS. CHLOE M GENTER

Mailing Address 5241 SW 24TH AVE

City

CAPE CORAL

State

FL

Zip Code

33914

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2014

Transaction ID : SA11AI.21825

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. MR. DANIEL J GENTER SR

Mailing Address 5241 SW 24TH AVE

City

CAPE CORAL

State

FL

Zip Code

33914

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 05 / 2014

Transaction ID : SA11AI.21816

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

C. MRS GENA GORE

Mailing Address 8940 HIGHWAY 71 N

City

DRY PRONG

State

LA

Zip Code

71423

FEC ID number of contributing
federal political committee.

C

Name of Employer

T & G TREES, LLC

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SA11AI.24941

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

20030.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. CHRIS GUIDRY

Mailing Address 5396 COURTYARD DR

City

GONZALES

State

LA

Zip Code

70737

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUIDRY ASSOCIATES

Occupation

OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 20 / 2014

Transaction ID : SA11AI.19452

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. MR. CHRIS GUIDRY

Mailing Address 5396 COURTYARD DR

City

GONZALES

State

LA

Zip Code

70737

FEC ID number of contributing
federal political committee.

C

Name of Employer

GUIDRY ASSOCIATES

Occupation

OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 09 / 2014

Transaction ID : SA11AI.25325

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. MR. GREGORY HAMER

Mailing Address PO BOX 3608

City

MORGAN CITY

State

LA

Zip Code

70381

FEC ID number of contributing
federal political committee.

C

Name of Employer

B & G FOOD ENTERPRISES LLC

Occupation

EXECUTIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 04 / 2014

Transaction ID : SA11AI.18973

Amount of Each Receipt this Period

-500.00

EXCESS FUNDS TRANSFERRED

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

200.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. P C HAVENS

Mailing Address #8 AUDUBON PL

City

NEW ORLEANS

State

LA

Zip Code

70118

FEC ID number of contributing federal political committee.

C

Name of Employer

SEISMIC EXCHANGE

Occupation

CHRMN OF THE BOARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : SA11AI.22429

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. MRS. SHEILA HEAD

Mailing Address PO BOX 275

City

ODONNELL

State

TX

Zip Code

79351

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 12 / 12 / 2014

Transaction ID : SA11AI.20476

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. ALLAN HEINKE

Mailing Address 41WINTERWOOD ROAD

City

SOUTHINGTON

State

CT

Zip Code

06489

FEC ID number of contributing federal political committee.

C

Name of Employer

MOHAWK NORTHEAST, INC.

Occupation

CONSTRUCTION COMPANY EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

 M M / D D / Y Y Y Y Y
 11 / 24 / 2014

Transaction ID : SA11AI.24632

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JEFF HILL

Mailing Address P.O. BOX 3236

City
VENTURA

State Zip Code
CA 93006

FEC ID number of contributing
federal political committee.

C

Name of Employer
M&M MANAGEMENT

Occupation
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 24 / 2014

Transaction ID : SA11AI.24636

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. MRS MALCOLM HINGLE

Mailing Address 919 TOPAZ ST

City
NEW ORLEANS

State Zip Code
LA 70124

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRESCENT RIVER PILOTS

Occupation
RIVER PILOT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA11AI.20649

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. WAYNE HOGUE

Mailing Address 6320 WETZEL COURT

City
RENO

State Zip Code
NV 89511

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNEMPLOYED

Occupation
UNEMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 23 / 2014

Transaction ID : SA11AI.26547

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 22 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. LEONARD HOLLAR

Mailing Address 1125 CLOVERDALE DR.

City

SHREVEPORT

State

LA

Zip Code

71118

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

11 / 20 / 2014

Transaction ID : SA11AI.19459

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. LUCAS HUDDLESTON

Mailing Address PO BOX 742

City

THIBODAUX

State

LA

Zip Code

70302

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

11 / 20 / 2014

Transaction ID : SA11AI.19425

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. LUCAS HUDDLESTON

Mailing Address PO BOX 742

City

THIBODAUX

State

LA

Zip Code

70302

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

12 / 17 / 2014

Transaction ID : SA11AI.19591

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 187

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MS. KAREN A IACOVELLI

Mailing Address 6 RUGOSA WAY

City
GREERState
SCZip Code
29650FEC ID number of contributing
federal political committee.

C

Name of Employer

PI HOLDINGS

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			21			2014			

Transaction ID : SA11AI.20540

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. MR. PHILLIP R JAMES

Mailing Address 5947 HWY 569

City

FERRIDAY

State

LA

Zip Code

71334

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SA11AI.20589

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. IV JEANSONNE

Mailing Address 7266 TOM DR

City

BATON ROUGE

State

LA

Zip Code

70806

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			25			2014			

Transaction ID : SA11AI.20632

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

11025.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MARGARET M JENKS

Mailing Address 750 S HANLEY RD

City
SAINT LOUIS

State Zip Code
MO 63105

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 04 / 2014

Transaction ID : SA11AI.24825

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. B. K. JENNINGS

Mailing Address P.O. BOX 275

City
CARVERSVILLE

State Zip Code
PA 18913

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 24 / 2014

Transaction ID : SA11AI.24092

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. MRS ANN L JOHNSON

Mailing Address 703 ISLAND DR

City
PALM BEACH

State Zip Code
FL 33480

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

11 / 18 / 2014

Transaction ID : SA11AI.20542

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)..... ►

10750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. CHARLES B JOHNSON

Mailing Address 703 ISLAND DR

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

11 / 18 / 2014

Transaction ID : SA11AI.20543

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. ERIC JOHNSON

Mailing Address 837 S PARK TRAIL DR

City

CARMEL

State

IN

Zip Code

46032

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

12 / 01 / 2014

Transaction ID : SA11AI.23142

Amount of Each Receipt this Period

550.00

Full Name (Last, First, Middle Initial)

C. WANDA F JOUBERT

Mailing Address 510 SW RAILROAD AVE

City

WHITE CASTLE

State

LA

Zip Code

70586

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

11 / 25 / 2014

Transaction ID : SA11AI.20633

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10575.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 26 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MRS CAROLINE M KINKLE

Mailing Address 1156 OXFORD RD

City

SAN MARINO

State

CA

Zip Code

91108

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SA11AI.21205

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B. MR. STEPHEN KOTRAN

Mailing Address 318 W 78TH ST

City

NEW YORK

State

NY

Zip Code

10024

FEC ID number of contributing
federal political committee.

C

Name of Employer

SULLIVAN & CROMWELL LLP

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 12 / 2014

Transaction ID : SA11AI.19973

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. MR. EDDIE CHUN PING LAU

Mailing Address 1201 CAMELLIA BLVD STE 214

City

LAFAYETTE

State

LA

Zip Code

70508

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCMC GROUP LLC

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 10 / 2014

Transaction ID : SA11AI.22230

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1725.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. MICHAEL D LOWRIE

Mailing Address 1835 GLEN COVE DR.

City
BENTON

State Zip Code
LA 71111

FEC ID number of contributing
federal political committee.

C

Name of Employer
ACADIANA ENERGY

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

11 / 20 / 2014

Transaction ID : SA11AI.19454

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. MR. MICHAEL D LOWRIE

Mailing Address 1835 GLEN COVE DR.

City
BENTON

State Zip Code
LA 71111

FEC ID number of contributing
federal political committee.

C

Name of Employer
ACADIANA ENERGY

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

12 / 09 / 2014

Transaction ID : SA11AI.26333

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. CRAIG MANOUKIAN

Mailing Address 2140 KING EDWARD DRIVE

City
RENO

State Zip Code
NV 89503

FEC ID number of contributing
federal political committee.

C

Name of Employer
MANOUKIAN PROJECT MANAGEMENT

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 24 / 2014

Transaction ID : SA11AI.23997

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 187

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. ROBERT MCDANIEL

Mailing Address 14347 LOCUST ST

City	State	Zip Code
BATON ROUGE	LA	70819

FEC ID number of contributing federal political committee.

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2014

Transaction ID : SA11AI.20843

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. JAMES MCGOVERN

Mailing Address 3583 BEVERLY GLEN TERRACE

City	State	Zip Code
SHERMAN OAKS	CA	91423

FEC ID number of contributing federal political committee.

Name of Employer

ALAGEN CAPITAL

Occupation

FINANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : SA11AI.24009

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. MR. ROBERT C MONTI
Mailing Address PO BOX 677
350 EVELYN DR

City	State	Zip Code
LULING	LA	70070

FEC ID number of contributing federal political committee.

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2014

Transaction ID : SA11AI.20778

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 29 OF 187
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. ALICE BAIRD MUNGER

Mailing Address 2729 CONSTANCE ST

City	State	Zip Code
NEW ORLEANS	LA	70130

FEC ID number of contributing federal political committee.

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2014

Transaction ID : SA11AI.20546

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

B. ALICE BAIRD MUNGER

Mailing Address 2729 CONSTANCE ST

City	State	Zip Code
NEW ORLEANS	LA	70130

FEC ID number of contributing federal political committee.

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2014

Transaction ID : SA11AI.22407

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. RICHARD O'BRIEN
Mailing Address PO BOX 698
247 MORGANS RUN

City	State	Zip Code
WHITE STONE	VA	22578

FEC ID number of contributing federal political committee.

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2014

Transaction ID : SA11AI.24622

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. DONNA J OLSON

Mailing Address 20115 COLONY CT

City

BROOKFIELD

State

WI

Zip Code

53045

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

12 / 01 / 2014

Transaction ID : SA11AI.22776

Amount of Each Receipt this Period

220.00

Full Name (Last, First, Middle Initial)

B. LEE PARTYKA

Mailing Address 376 MANSFIELD RD

City

NORTH HAVEN

State

CT

Zip Code

06473

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

CAR DEALER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 09 / 2014

Transaction ID : SA11AI.26350

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. MR. THOMAS PETERFLY

Mailing Address 1255 S OCEAN BOULEVARD

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing
federal political committee.

C

Name of Employer

INTERACTIVE BROKERS GROUP

Occupation

CHAIRMAN

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

12 / 01 / 2014

Transaction ID : SA11AI.22362

Amount of Each Receipt this Period

10000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10520.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JANICE PHILLIPS

Mailing Address 2803 PARGOUD BLVD

City
MONROE

State Zip Code
LA 71201

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2014

Transaction ID : SA11AI.22742

Amount of Each Receipt this Period

330.00

Full Name (Last, First, Middle Initial)

B. THEO PINSON

Mailing Address 5850 SAN FELIPE ST # 670

City
HOUSTON

State Zip Code
TX 77057

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 09 / 2014

Transaction ID : SA11AI.26302

Amount of Each Receipt this Period

220.00

Full Name (Last, First, Middle Initial)

C. THOMAS E PLANK

Mailing Address 1629 BINGHAM DR

City
KNOXVILLE

State Zip Code
TN 37922

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 09 / 2014

Transaction ID : SA11AI.25191

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 187
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. DONALD G POPP

Mailing Address PO BOX 425

City State Zip Code
 ESTHERWOOD LA 70124

FEC ID number of contributing
federal political committee.

C

Name of Employer
CYCLE CONSTRUCTION CO

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 25 2014

Transaction ID : SA11AI.20608

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. MR. DONALD G POPP

Mailing Address PO BOX 425

City State Zip Code
 ESTHERWOOD LA 70124

FEC ID number of contributing
federal political committee.

C

Name of Employer
CYCLE CONSTRUCTION CO

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 09 2014

Transaction ID : SA11AI.25814

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. MR. THOMAS C PRUDHOMME

Mailing Address 620 BLACKMAN ST

City State Zip Code
 LAKE CHARLES LA 70605

FEC ID number of contributing
federal political committee.

C

Name of Employer
RADJET SERVICES US INC

Occupation
ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 25 2014

Transaction ID : SA11AI.20625

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

45.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. WILLIAM H ROE

Mailing Address 90 CARDINAL LANE

City

MANDEVILLE

State

LA

Zip Code

70471

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 25 / 2014

Transaction ID : SA11AI.20703

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. DEAN ROGERS

Mailing Address 3509 SOUTH 387TH AVE

City

ABERDEEN

State

SD

Zip Code

57401

FEC ID number of contributing
federal political committee.

C

Name of Employer

DEAN ROGERS AUTOMOTIVE

Occupation

OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 24 / 2014

Transaction ID : SA11AI.23931

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. ANNA SAKKIS

Mailing Address 4168 RETTIG AVE

City

OAKLAND

State

CA

Zip Code

94602

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 24 / 2014

Transaction ID : SA11AI.24190

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. PAMELA SCHAFER

Mailing Address 3636 N. HULLEN ST.

City
METAIRIE

State Zip Code
LA 70002

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW ORLEANS COPPER, INC.

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.25

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SA11AI.24799

Amount of Each Receipt this Period

8.25

Full Name (Last, First, Middle Initial)

B. PAMELA SCHAFER

Mailing Address 3636 N. HULLEN ST.

City
METAIRIE

State Zip Code
LA 70002

FEC ID number of contributing
federal political committee.

C

Name of Employer
NEW ORLEANS COPPER, INC.

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.25

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SA11AI.24939

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. VINSON SERIO

Mailing Address 4416 WEST ESPLANADE AVENUE

City
METAIRIE

State Zip Code
LA 70006

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 20 / 2014

Transaction ID : SA11AI.19418

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

98.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. JOHN SHANK

Mailing Address 4116 WOODSIDE DR

City State Zip Code
 LAKE CHARLES LA 70605

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 25 / 2014

Transaction ID : SA11AI.20729

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. ROLAND SHAPLEY

Mailing Address 5039 PARKOAKS DR

City State Zip Code
 BATON ROUGE LA 70816

FEC ID number of contributing
federal political committee.

C

Name of Employer

SHAPLEY MARINE CO

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 25 / 2014

Transaction ID : SA11AI.20675

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. ALLEN SIMON

Mailing Address 1383 N CRISS ST

City State Zip Code
 CHANDLER AZ 85226

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 24 / 2014

Transaction ID : SA11AI.24080

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MS. DIANE G SMITH

Mailing Address 2200 BUTTS ROAD #320

City State Zip Code
 BOCA RATON FL 33431

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
 12 / 01 / 2014

Transaction ID : SA11AI.22360

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. MR. GORDON SMITH

Mailing Address 8611 COUNTRY CLUB DRIVE

City State Zip Code
 BETHESDA MD 20817

FEC ID number of contributing
federal political committee.

C

Name of Employer

SMITH FOODS

Occupation

BOARD MEMBER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.62

Date of Receipt

M M / D D / Y Y Y Y
 12 / 18 / 2014

Transaction ID : SA11AI.26551

Amount of Each Receipt this Period

384.62

Full Name (Last, First, Middle Initial)

C. MS. SHARON SMITH

Mailing Address 8611 COUNTRY CLUB DRIVE

City State Zip Code
 BETHESDA MD 20817

FEC ID number of contributing
federal political committee.

C

Name of Employer

SMITH FOODS

Occupation

BOARD MEMBER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.61

Date of Receipt

M M / D D / Y Y Y Y
 12 / 18 / 2014

Transaction ID : SA11AI.26549

Amount of Each Receipt this Period

384.61

SUBTOTAL of Receipts This Page (optional)..... ►

10769.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 187

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. Mr. THOMAS W SMITH

Mailing Address 2200 BUTTS ROAD #320

City State Zip Code
 BOCA RATON FL 33431

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PRESCOTT INVESTORS

Occupation
 FOUNDING PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 01 2014

Transaction ID : SA11AI.22358

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. ROBERT G STEINER

Mailing Address PO BOX 514

City State Zip Code
 CHULA VISTA CA 91912

FEC ID number of contributing
federal political committee.

C

Name of Employer
 RETIRED

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 01 2014

Transaction ID : SA11AI.23634

Amount of Each Receipt this Period

220.00

Full Name (Last, First, Middle Initial)

C. RALPH W STEPHENSON JR

Mailing Address 333 LEE AVE APT 381

City State Zip Code
 BATON ROUGE LA 70808

FEC ID number of contributing
federal political committee.

C

Name of Employer
 RETIRED

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 18 2014

Transaction ID : SA11AI.22404

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10320.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. RICHARD STOKER

Mailing Address 6899 COLLINS AVE. , N 606

City State Zip Code
 MIAMI BEACH FL 33141

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 23 2014

Transaction ID : SA11AI.26450

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MR. ALVIN E SWANNER

Mailing Address 28 CHATEAU HAUT BRION DR

City State Zip Code
 KENNER LA 70065

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 28 2014

Transaction ID : SA11AI.20914

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CHARLES THOMAS

Mailing Address 7040 MODESTO

City State Zip Code
 BATON ROUGE LA 70811

FEC ID number of contributing
federal political committee.

C

Name of Employer

FAMILY VALUES RESOURCE INSTITUTE

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.75

Date of Receipt

M M / D D / Y Y Y Y Y
 12 04 2014

Transaction ID : SA11AI.24942

Amount of Each Receipt this Period

8.25

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2008.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. CHARLES THOMAS

Mailing Address 7040 MODESTO

City

BATON ROUGE

State

LA

Zip Code

70811

FEC ID number of contributing
federal political committee.

C

Name of Employer

FAMILY VALUES RESOURCE INSTITUTE

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.75

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SA11AI.24943

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. TONY M TORTORICH

Mailing Address 5910 VICKSBURG ST

City

NEW ORLEANS

State

LA

Zip Code

70124

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 04 / 2014

Transaction ID : SA11AI.18972

Amount of Each Receipt this Period

-46.00

EXCESS FUNDS TRANSFERRED

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MRS RUTH ULRICH

Mailing Address 406 FORSYTHE AVE

City

MONROE

State

LA

Zip Code

71201

FEC ID number of contributing
federal political committee.

C

Name of Employer

CENTURYTEL

Occupation

PLANNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 19 / 2014

Transaction ID : SA11AI.20547

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 187
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MRS RUTH ULRICH

Mailing Address 406 FORSYTHE AVE

City State Zip Code
 MONROE LA 71201

FEC ID number of contributing
federal political committee.

C

Name of Employer

CENTURYTEL

Occupation

PLANNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 19 / 2014

Transaction ID : SA11AI.22406

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. JAMES WATTS

Mailing Address 8631 ECHO CT

City State Zip Code
 LINCOLN NE 68520

FEC ID number of contributing
federal political committee.

C

Name of Employer

WATTS AND HERSHERGE

Occupation

CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 / 09 / 2014

Transaction ID : SA11AI.26195

Amount of Each Receipt this Period

220.00

Full Name (Last, First, Middle Initial)

C. BURTON WEAVER

Mailing Address PO BOX 98

City State Zip Code
 FLORA LA 71428

FEC ID number of contributing
federal political committee.

C

Name of Employer

WEAVER BROTHERS LAND

Occupation

FORESTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 28 / 2014

Transaction ID : SA11AI.20907

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

820.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. GEORGE WHITE

Mailing Address 1205 JEFFERSON AVENUE

City State Zip Code
 NEW ORLEANS LA 70115

FEC ID number of contributing
federal political committee.

C

Name of Employer
 STEWART ENTERPRISES

Occupation
 DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 20 2014

Transaction ID : SA11AI.19453

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. GEORGE WHITE

Mailing Address 1205 JEFFERSON AVENUE

City State Zip Code
 NEW ORLEANS LA 70115

FEC ID number of contributing
federal political committee.

C

Name of Employer
 STEWART ENTERPRISES

Occupation
 DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 09 2014

Transaction ID : SA11AI.25324

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. JOHN A WILLIAMS

Mailing Address 2997 ASHMONT DR

City State Zip Code
 GERMANTOWN TN 38138

FEC ID number of contributing
federal political committee.

C

Name of Employer
 LIFE CHOICES INC

Occupation
 AVIONIC SPECIALIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 04 2014

Transaction ID : SA11AI.24946

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 187
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JEFFREY WILLIAMSON

Mailing Address 2601 PARGOUD BLVD

City State Zip Code
 MONROE LA 71201

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

ENTREPRENEUR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.50

Date of Receipt

M M / D D / Y Y Y Y Y
 12 04 2014

Transaction ID : SA11AI.24782

Amount of Each Receipt this Period

8.25

Full Name (Last, First, Middle Initial)

B. MR. JOSEPH C WINK JR

Mailing Address 6306 BEAUREGARD AVE

City State Zip Code
 NEW ORLEANS LA 70124

FEC ID number of contributing
federal political committee.

C

Name of Employer

WINK COMPANIES LLC

Occupation

MANAGEMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 25 2014

Transaction ID : SA11AI.20637

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. TOMMY WOODARD

Mailing Address 313 THIRD ST

City State Zip Code
 BATON ROUGE LA 70801

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
 12 04 2014

Transaction ID : SA11AI.24852

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

333.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 43 OF 187

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JAMES YOUNG

Mailing Address 2207 RIDGEWAY ST.

City

ARDMORE

State

OK

Zip Code

73401

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 24 / 2014

Transaction ID : SA11AI.23957

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

108671.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 OF 187

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. BOEING COMPANY PAC

Mailing Address 929 LONG BRIDGE DR

City State Zip Code
ARLINGTON VA 22202

FEC ID number of contributing
federal political committee.

C C00142711

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

12 / **01** / **2014**

Transaction ID : SA11C.21008

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

B. BRYAN CAVE LLP POLITICAL ACTION COMMITTEE

Mailing Address 1155 F STREET NW
SUITE 700

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing
federal political committee.

C C00332643

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

12 / **05** / **2014**

Transaction ID : SA11C.21827

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. FREEDOM PROJECT; THE

Mailing Address 320 1ST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00305805

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **18** / **2014**

Transaction ID : SA11C.20545

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)..... ►

15000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 187

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. HELP UNITE REPUBLICANS TODAY POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 283

City State Zip Code
CHATHAM VA 24531

FEC ID number of contributing
federal political committee.

C C00496323

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 25 / 2014

Transaction ID : SA11C.20731

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. MICHIGAN REPUBLICAN PARTY

Mailing Address 520 SEYMOUR AVENUE

City State Zip Code
LANSING MI 48933

FEC ID number of contributing
federal political committee.

C C00041160

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
12 / 16 / 2014

Transaction ID : SA11C.22357

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

7500.00

TOTAL This Period (last page this line number only)..... ►

22500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. WILLIAM H. BROYLES JR.

Mailing Address 335 MILLICENT WAY

City
SHREVEPORT

State Zip Code
LA 71106

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE BROYLES GROUP

Occupation
INVESTMENTS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA12.22460

Amount of Each Receipt this Period

2500.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CASSIDY VICTORY

Mailing Address 500 CUMMINGS CENTER SUITE 4400
C/O RED CURVE SOLUTIONS

City
BEVERLY

State Zip Code
MA 01915

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262827.07

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA12.22437

Amount of Each Receipt this Period

68401.34

Full Name (Last, First, Middle Initial)

C. CASSIDY VICTORY

Mailing Address 500 CUMMINGS CENTER SUITE 4400
C/O RED CURVE SOLUTIONS

City
BEVERLY

State Zip Code
MA 01915

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338460.94

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.22467

Amount of Each Receipt this Period

75633.87

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144035.21

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 187

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. ANN LYNN CHARBONNET

Mailing Address 639 LOYOLA AVE
STE 2775

City State Zip Code
NEW ORLEANS LA 70113

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.22481

Amount of Each Receipt this Period

1150.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. J. STOREY CHARBONNET

Mailing Address 639 LOYOLA AVE
STE. 2775

City State Zip Code
NEW ORLEANS LA 70113

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHNSON RICE & COMPANY LLC

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.22479

Amount of Each Receipt this Period

2050.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. COLORADO REPUBLICAN COMMITTEE

Mailing Address 5950 S. WILLOW DRIVE
SUITE 302

City State Zip Code
GREENWOOD VILLAGE CO 80111

FEC ID number of contributing
federal political committee.

C C00033134

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6647.80

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA12.19025

Amount of Each Receipt this Period

6647.80

In-kind - TRAVEL & TRANSPORTATION: FLIGHTS

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6647.80

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 48 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. COLORADO REPUBLICAN COMMITTEE

Mailing Address 5950 S. WILLOW DRIVE
SUITE 302

City State Zip Code
GREENWOOD VILLAGE CO 80111

FEC ID number of contributing
federal political committee.

C C00033134

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

72947.80

Date of Receipt

11 / **21** / **2014**

Transaction ID : SA12.19028

Amount of Each Receipt this Period

66300.00

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. MR. LAWRENCE F DEGEORGE

Mailing Address 140 INTRACOASTAL POINTE DR STE 410

City State Zip Code
JUPITER FL 33477

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

LPL INVESTMENT GROUP

CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

11 / **24** / **2014**

Transaction ID : SA12.19631

Amount of Each Receipt this Period

10000.00

SENATE BATTLEGROUND FUND TRANSFER

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. EDWARD L. DIEFENTHAL

Mailing Address 131 AIRLINE DR

City State Zip Code
METAIRIE LA 70001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

WOODVINE GROUP, LLC

PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

12 / **03** / **2014**

Transaction ID : SA12.22483

Amount of Each Receipt this Period

5000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

66300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. EXPRESS SCRIPTS INC. POLITICAL FUND (A/K/A EXPRESS SCRIPTS PAC)

Mailing Address 300 NEW JERSEY AVENUE NE
SUITE 600

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing
federal political committee.

C C00365072

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

12 / **03** / **2014**

Transaction ID : SA12.22497

Amount of Each Receipt this Period

5000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. G. ARCHER FRIERSONII

Mailing Address 10985 HARTS ISLAND RD

City State Zip Code
SHREVEPORT LA 71115

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FRIERSON BROTHERS

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

12 / **03** / **2014**

Transaction ID : SA12.22477

Amount of Each Receipt this Period

2600.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GEORGIA REPUBLICAN PARTY

Mailing Address P. O. BOX 550008

City State Zip Code
ATLANTA GA 30355

FEC ID number of contributing
federal political committee.

C C00150672

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5436.00

Date of Receipt

12 / **03** / **2014**

Transaction ID : SA12.18977

Amount of Each Receipt this Period

5436.00

In-kind - TRAVEL: AIR

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5436.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 187

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. GEORGIA REPUBLICAN PARTY

Mailing Address P. O. BOX 550008

City State Zip Code
ATLANTA GA 30355

FEC ID number of contributing
federal political committee.

C C00150672

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36693.86

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.19062

Amount of Each Receipt this Period

31257.86

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. GEORGIA REPUBLICAN PARTY

Mailing Address P. O. BOX 550008

City State Zip Code
ATLANTA GA 30355

FEC ID number of contributing
federal political committee.

C C00150672

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

47027.42

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 15 / 2014

Transaction ID : SA12.19045

Amount of Each Receipt this Period

10333.56

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. ANDIE GIARDINA

Mailing Address 918 E 1ST STREET

City State Zip Code
THIBODAUX LA 70301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

HOMEMAKER

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA12.22454

Amount of Each Receipt this Period

10000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

41591.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MILTON G. GRAUGNARD

Mailing Address 2929 SVENDSON DRIVE

City State Zip Code
 BATON ROUGE LA 70809

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAJUN CONSTRUCTORS

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

11 / 25 / 2014

Transaction ID : SA12.22439

Amount of Each Receipt this Period

5200.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BOBBI GRIGSBY

Mailing Address 19145 W. MUIRFIELD CIRCLE

City State Zip Code
 BATON ROUGE LA 70810

FEC ID number of contributing
federal political committee.

C

Name of Employer
HOMEMAKER

Occupation
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

11 / 25 / 2014

Transaction ID : SA12.22448

Amount of Each Receipt this Period

5200.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MR. D GREGORY HERRIGAN

Mailing Address 11165 OLD HARBOUR ROAD

City State Zip Code
 NORTH PALM BEACH FL 33408

FEC ID number of contributing
federal political committee.

C

Name of Employer
SILGAN HOLDINGS INC

Occupation
CO-CHRMN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

11 / 24 / 2014

Transaction ID : SA12.19625

Amount of Each Receipt this Period

10000.00

SENATE BATTLEGROUND FUND TRANSFER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. ILLINOIS REPUBLICAN PARTY

Mailing Address P.O. BOX 64897

City State Zip Code
 CHICAGO IL 60664

FEC ID number of contributing
federal political committee.

C C00005926

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2721.15

Date of Receipt

M M / D D / Y Y Y Y Y
 12 16 2014

Transaction ID : SA12.19039

Amount of Each Receipt this Period

2721.15

In-kind - TRAVEL & TRANSPORTATION-FLIGHTS

Full Name (Last, First, Middle Initial)

B. ILLINOIS REPUBLICAN PARTY

Mailing Address P.O. BOX 64897

City State Zip Code
 CHICAGO IL 60664

FEC ID number of contributing
federal political committee.

C C00005926

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11615.66

Date of Receipt

M M / D D / Y Y Y Y Y
 12 16 2014

Transaction ID : SA12.19041

Amount of Each Receipt this Period

8894.51

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. INDIANA REPUBLICAN STATE COMMITTEE, INC.

Mailing Address 47 S. MERIDIAN ST. SUITE 200

City State Zip Code
 INDIANAPOLIS IN 46204

FEC ID number of contributing
federal political committee.

C C00006486

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.20

Date of Receipt

M M / D D / Y Y Y Y Y
 11 24 2014

Transaction ID : SA12.19007

Amount of Each Receipt this Period

463.20

In-kind - TRAVEL & TRANSPORTATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12078.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 53 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. INDIANA REPUBLICAN STATE COMMITTEE, INC.

Mailing Address 47 S. MERIDIAN ST. SUITE 200

City State Zip Code
INDIANAPOLIS IN 46204

FEC ID number of contributing
federal political committee.

C C00006486

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1924.74

Date of Receipt

11 / **24** / **2014**

Transaction ID : SA12.19010

Amount of Each Receipt this Period

1461.54

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. INDIANA REPUBLICAN STATE COMMITTEE, INC.

Mailing Address 47 S. MERIDIAN ST. SUITE 200

City State Zip Code
INDIANAPOLIS IN 46204

FEC ID number of contributing
federal political committee.

C C00006486

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3386.28

Date of Receipt

12 / **22** / **2014**

Transaction ID : SA12.19064

Amount of Each Receipt this Period

1461.54

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. KEN JACOB

Mailing Address 2883 E. LAKESHORE DRIVE

City State Zip Code
BATON ROUGE LA 70808

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CAJUN INDUSTRIES LLC

PRESIDENT/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

11 / **25** / **2014**

Transaction ID : SA12.22443

Amount of Each Receipt this Period

5200.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2923.08

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 OF 187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. CHARLES P JOYCE

Mailing Address PO BOX 483

City
WELLSVILLE

State Zip Code
NY 14895

FEC ID number of contributing
federal political committee.

C

Name of Employer
OTIS EASTERN SERVS LLC

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 19 / 2014

Transaction ID : SA12.19623

Amount of Each Receipt this Period

10000.00

SENATE BATTLEGROUND FUND TRANSFER

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JAY LAPEYRE

Mailing Address P.O. BOX 50699

City
NEW ORLEANS

State Zip Code
LA 70150

FEC ID number of contributing
federal political committee.

C

Name of Employer
LAITNAM LLC

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA12.22464

Amount of Each Receipt this Period

2400.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. RAY J. LASSEIGNE

Mailing Address 341 AUTUMN RIDGE DRIVE

City
BOSSIER CITY

State Zip Code
LA 71111

FEC ID number of contributing
federal political committee.

C

Name of Employer
TMR EXPLORATION, INC.

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA12.22450

Amount of Each Receipt this Period

1000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 55 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. THOMAS E. LAVIN

Mailing Address 117 RIVERDALE DRIVE

City
COVINGTON

State Zip Code
LA 70433

FEC ID number of contributing
federal political committee.

C

Name of Employer
SURGICAL SPECIALIST OF LA, LLC

Occupation
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA12.22462

Amount of Each Receipt this Period

3600.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. HOLLY LAWTON

Mailing Address 1450 WILLIAM STREET
2ND FLOOR

City
LAKE CHARLES

State Zip Code
LA 70601

FEC ID number of contributing
federal political committee.

C

Name of Employer
JACK LAWTON, INC.

Occupation
EXECUTIVE ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.22491

Amount of Each Receipt this Period

5000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JACK E. LAWTON

Mailing Address 1450 WILLIAM STREET
2ND FLOOR

City
LAKE CHARLES

State Zip Code
LA 70601

FEC ID number of contributing
federal political committee.

C

Name of Employer
JACK LAWTON, INC

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA12.22458

Amount of Each Receipt this Period

10000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

0.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JACK E. LAWTON JR.

Mailing Address 1450 WILLIAM STREET
2ND FLOOR

City	State	Zip Code
LAKE CHARLES	LA	70601

FEC ID number of contributing
federal political committee.

C

Name of Employer
JACK LAWTON, INC

Occupation
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

12 / 03 / 2014

Transaction ID : SA12.22489

Amount of Each Receipt this Period

0.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MS. SHIRLEY J LEBLANC

Mailing Address 6428 PROVINCE LANE

City	State	Zip Code
BATON ROUGE	LA	70808

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5025.00

Date of Receipt

11 / 25 / 2014

Transaction ID : SA12.22444

Amount of Each Receipt this Period

5000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MARYLAND REPUBLICAN STATE CENTRAL COMMITTEE

Mailing Address P.O. BOX 631

City	State	Zip Code
ANNAPOLIS	MD	21404

FEC ID number of contributing
federal political committee.

C C00120055

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

672.81

Date of Receipt

12 / 01 / 2014

Transaction ID : SA12.19022

Amount of Each Receipt this Period

672.81

IN-KIND: PAYROLL/PAYROLL TAXES

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

672.81

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 57 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MARYLAND REPUBLICAN STATE CENTRAL COMMITTEE

Mailing Address P.O. BOX 631

City State Zip Code
ANNAPOLIS MD 21404

FEC ID number of contributing
federal political committee.

C C00120055

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1085.96

Date of Receipt

12 / **18** / **2014**

Transaction ID : SA12.26601

Amount of Each Receipt this Period

413.15

In-kind - TRAVEL & TRANSPORTATION

Full Name (Last, First, Middle Initial)

B. MARYLAND REPUBLICAN STATE CENTRAL COMMITTEE

Mailing Address P.O. BOX 631

City State Zip Code
ANNAPOLIS MD 21404

FEC ID number of contributing
federal political committee.

C C00120055

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3319.71

Date of Receipt

12 / **18** / **2014**

Transaction ID : SA12.26603

Amount of Each Receipt this Period

2233.75

IN-KIND-PERSONNEL

Full Name (Last, First, Middle Initial)

C. MICHIGAN REPUBLICAN PARTY

Mailing Address 520 SEYMOUR AVENUE

City State Zip Code
LANSING MI 48933

FEC ID number of contributing
federal political committee.

C C00041160

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

32800.41

Date of Receipt

12 / **18** / **2014**

Transaction ID : SA12.26605

Amount of Each Receipt this Period

27800.41

IN-KIND-PERSONNEL

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30447.31

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 187

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MISCHER INVESTMENTS, L.P.

Mailing Address 9 GREENWAY PLAZA
SUITE 2900

City State Zip Code
HOUSTON TX 77046

FEC ID number of contributing
federal political committee.

C

Name of Employer

MISCHER INVESTMENTS, LP

Occupation

REAL ESTATE DEVELOPMENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.22471

Amount of Each Receipt this Period

4800.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GARY W. MOCKLER

Mailing Address 612 WOODVIEW COURT

City State Zip Code
BATON ROUGE LA 70810

FEC ID number of contributing
federal political committee.

C

Name of Employer

MOCKLER BEVERAGE

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA12.22452

Amount of Each Receipt this Period

10000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL C. MORAN

Mailing Address 12520 W. LAKE ESTATE

City State Zip Code
BATON ROUGE LA 70810

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAJUN DEEP FOUNDATIONS

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 25 / 2014

Transaction ID : SA12.22441

Amount of Each Receipt this Period

2600.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 59 OF 187

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Mailing Address 425 SECOND STREET NE

City	State	Zip Code
WASHINGTON	DC	20002

FEC ID number of contributing federal political committee.

C C00027466

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

12 / **19** / **2014**

Transaction ID : SA12.22418

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. JEFFREY NEAL

Mailing Address 1099 PELHAM ROAD

City	State	Zip Code
WINNETKA	IL	60093

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7400.00

Date of Receipt

11 / **25** / **2014**

Transaction ID : SA12.22456

Amount of Each Receipt this Period

7400.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

Mailing Address 10 WATER STREET

City	State	Zip Code
CONCORD	NH	03301

FEC ID number of contributing federal political committee.

C C00136457

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4054.95

Date of Receipt

12 / **01** / **2014**

Transaction ID : SA12.19002

Amount of Each Receipt this Period

4054.95

In-kind - TRAVEL & TRANSPORTATION

SUBTOTAL of Receipts This Page (optional)..... ►

6554.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

Mailing Address 10 WATER STREET

City State Zip Code
 CONCORD NH 03301

FEC ID number of contributing
federal political committee.

C C00136457

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10362.12

Date of Receipt

12 / **01** / **2014**

Transaction ID : SA12.19005

Amount of Each Receipt this Period

6307.17

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. NEW JERSEY REPUBLICAN STATE COMMITTEE

Mailing Address 28 WEST STATE STREET SUITE 319

City State Zip Code
 TRENTON NJ 08608

FEC ID number of contributing
federal political committee.

C C00164418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.30

Date of Receipt

12 / **02** / **2014**

Transaction ID : SA12.18988

Amount of Each Receipt this Period

620.30

In-kind - TRAVEL & TRANSPORTATION

Full Name (Last, First, Middle Initial)

C. NEW JERSEY REPUBLICAN STATE COMMITTEE

Mailing Address 28 WEST STATE STREET SUITE 319

City State Zip Code
 TRENTON NJ 08608

FEC ID number of contributing
federal political committee.

C C00164418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3557.56

Date of Receipt

12 / **02** / **2014**

Transaction ID : SA12.18992

Amount of Each Receipt this Period

2937.26

IN-KIND: PAYROLL/PAYROLL TAXES

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9864.73

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 187

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. NEW JERSEY REPUBLICAN STATE COMMITTEE

Mailing Address 28 WEST STATE STREET SUITE 319

City State Zip Code
TRENTON NJ 08608

FEC ID number of contributing
federal political committee.

C C00164418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6494.82

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 10 / 2014

Transaction ID : SA12.19035

Amount of Each Receipt this Period

2937.26

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. MS. SUZANNE L NIEDLAND

Mailing Address 140 INTRACOASTAL DR STE 410

City State Zip Code
JUPITER FL 33477

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SELF-EMPLOYED

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 24 / 2014

Transaction ID : SA12.19633

Amount of Each Receipt this Period

10000.00

SENATE BATTLEGROUND FUND TRANSFER

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. NORTH CAROLINA REPUBLICAN PARTY

Mailing Address 1506 HILLSBOROUGH STREET

City State Zip Code
RALEIGH NC 27605

FEC ID number of contributing
federal political committee.

C C00038505

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10303.10

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 01 / 2014

Transaction ID : SA12.19012

Amount of Each Receipt this Period

10303.10

In-kind - TRAVEL & TRANSPORTATION

SUBTOTAL of Receipts This Page (optional)..... ►

13240.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 62 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. NORTH CAROLINA REPUBLICAN PARTY

Mailing Address 1506 HILLSBOROUGH STREET

City State Zip Code
 RALEIGH NC 27605

FEC ID number of contributing
federal political committee.

C C00038505

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

38107.58

Date of Receipt

12 / **01** / **2014**

Transaction ID : SA12.19015

Amount of Each Receipt this Period

27804.48

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. NY REPUBLICAN STATE COMMITTEE

Mailing Address 315 STATE ST

City State Zip Code
 ALBANY NY 12210

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45000.00

Date of Receipt

11 / **17** / **2014**

Transaction ID : SA12.19641

Amount of Each Receipt this Period

45000.00

Full Name (Last, First, Middle Initial)

C. OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Mailing Address 211 S. FIFTH STREET

City State Zip Code
 COLUMBUS OH 43215

FEC ID number of contributing
federal political committee.

C C00162339

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2705.70

Date of Receipt

12 / **01** / **2014**

Transaction ID : SA12.19017

Amount of Each Receipt this Period

2705.70

In-kind - TRAVEL & TRANSPORTATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

75510.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 63 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Mailing Address 211 S. FIFTH STREET

City State Zip Code
 COLUMBUS OH 43215

FEC ID number of contributing
federal political committee.

C C00162339

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8794.71

Date of Receipt

12 / **01** / **2014**

Transaction ID : SA12.19020

Amount of Each Receipt this Period

6089.01

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. RUSSELL JOHN PEPPER

Mailing Address 5519 FIELDWOOD DRIVE

City State Zip Code
 HOUSTON TX 77056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SELF-EMPLOYED

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / **25** / **2014**

Transaction ID : SA12.22446

Amount of Each Receipt this Period

5000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MR. JOHN G RANGOS

Mailing Address 701 OSPREY POINT CIRCLE

City State Zip Code
 BOCA RATON FL 33431

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

JOHN G RANGOS SR CHARITABLE FOUNDATION

CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

11 / **24** / **2014**

Transaction ID : SA12.19627

Amount of Each Receipt this Period

2400.00

SENATE BATTLEGROUND FUND TRANSFER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6089.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 64 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. PATRICK RAYES

Mailing Address PO BOX 195429

City State Zip Code
DALLAS TX 75219

FEC ID number of contributing
federal political committee.

C

Name of Employer

RAYES INC.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / 17 / 2014

Transaction ID : SA12.19639

Amount of Each Receipt this Period

5000.00

SENATE BATTLEGROUNDS FUND TRANSFER

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MRS. BARBARA REIBEL

Mailing Address 42 DOUBLING ROAD

City State Zip Code
GREENWICH CT 06830

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

11 / 24 / 2014

Transaction ID : SA12.19635

Amount of Each Receipt this Period

10000.00

SENATE BATTLEGROUNDS FUND TRANSFER

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MR. JAMES S REIBEL

Mailing Address 42 DOUBLING ROAD

City State Zip Code
GREENWICH CT 06830

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

11 / 24 / 2014

Transaction ID : SA12.19637

Amount of Each Receipt this Period

10000.00

SENATE BATTLEGROUNDS FUND TRANSFER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 187

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. WENDY REILY

Mailing Address 640 MAGAZINE STREET

City State Zip Code
NEW ORLEANS LA 70130

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.22487

Amount of Each Receipt this Period

10000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. WILLIAM BOATNER REILY III

Mailing Address 640 MAGAZINE STREET

City State Zip Code
NEW ORLEANS LA 70130

FEC ID number of contributing
federal political committee.

C

Name of Employer

REILY FOOD CO.

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.22485

Amount of Each Receipt this Period

10000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. REPUBLICAN FEDERAL COMMITTEE OF PENNSYLVANIA

Mailing Address 112 STATE STREET

City State Zip Code
HARRISBURG PA 17101

FEC ID number of contributing
federal political committee.

C C00044842

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8924.90

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 24 / 2014

Transaction ID : SA12.19030

Amount of Each Receipt this Period

8924.90

In-kind - TRAVEL & TRANSPORTATION: FLIGHTS

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8924.90

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 66 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. REPUBLICAN FEDERAL COMMITTEE OF PENNSYLVANIA

Mailing Address 112 STATE STREET

City State Zip Code
HARRISBURG PA 17101

FEC ID number of contributing
federal political committee.

C C00044842

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

23880.40

Date of Receipt

11 / **24** / **2014**

Transaction ID : SA12.19033

Amount of Each Receipt this Period

14955.50

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786564.75

Date of Receipt

11 / **17** / **2014**

Transaction ID : SA12.19642

Amount of Each Receipt this Period

120000.00

Full Name (Last, First, Middle Initial)

C. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1396564.75

Date of Receipt

11 / **21** / **2014**

Transaction ID : SA12.19643

Amount of Each Receipt this Period

610000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

744955.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 187

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1426564.75

Date of Receipt

11 / **25** / **2014**

Transaction ID : SA12.19415

Amount of Each Receipt this Period

30000.00

Full Name (Last, First, Middle Initial)

B. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1487914.75

Date of Receipt

12 / **01** / **2014**

Transaction ID : SA12.21023

Amount of Each Receipt this Period

61350.00

Full Name (Last, First, Middle Initial)

C. REPUBLICAN PARTY OF FLORIDA

Mailing Address 420 E. JEFFERSON STREET

City State Zip Code
TALLAHASSEE FL 32301

FEC ID number of contributing
federal political committee.

C C00099259

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3906.69

Date of Receipt

12 / **02** / **2014**

Transaction ID : SA12.18997

Amount of Each Receipt this Period

3906.69

In-kind - TRAVEL & TRANSPORTATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95256.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 187

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. REPUBLICAN PARTY OF FLORIDA

Mailing Address 420 E. JEFFERSON STREET

City State Zip Code
TALLAHASSEE FL 32301

FEC ID number of contributing
federal political committee.

C C00099259

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

11238.02

Date of Receipt

12 / **02** / **2014**

Transaction ID : SA12.19000

Amount of Each Receipt this Period

7331.33

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. REPUBLICAN PARTY OF FLORIDA

Mailing Address 420 E. JEFFERSON STREET

City State Zip Code
TALLAHASSEE FL 32301

FEC ID number of contributing
federal political committee.

C C00099259

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33102.26

Date of Receipt

12 / **16** / **2014**

Transaction ID : SA12.19043

Amount of Each Receipt this Period

21864.24

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. REPUBLICAN PARTY OF FLORIDA

Mailing Address 420 E. JEFFERSON STREET

City State Zip Code
TALLAHASSEE FL 32301

FEC ID number of contributing
federal political committee.

C C00099259

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

34602.26

Date of Receipt

12 / **19** / **2014**

Transaction ID : SA12.19052

Amount of Each Receipt this Period

1500.00

In-kind - TRAVEL & TRANSPORTATION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30695.57

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. REPUBLICAN PARTY OF TEXAS

Mailing Address 1108 LAVACA STREET, SUITE 500

City State Zip Code
AUSTIN TX 78701

FEC ID number of contributing
federal political committee.

C C00143743

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10339.53

Date of Receipt

M M / D D / Y Y Y Y Y
12 03 2014

Transaction ID : SA12.19058

Amount of Each Receipt this Period

10339.53

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. REPUBLICAN PARTY OF TEXAS

Mailing Address 1108 LAVACA STREET, SUITE 500

City State Zip Code
AUSTIN TX 78701

FEC ID number of contributing
federal political committee.

C C00143743

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

21418.53

Date of Receipt

M M / D D / Y Y Y Y Y
12 19 2014

Transaction ID : SA12.19056

Amount of Each Receipt this Period

11079.00

IN-KIND - PAYROLL & PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. REPUBLICAN PARTY OF TEXAS

Mailing Address 1108 LAVACA STREET, SUITE 500

City State Zip Code
AUSTIN TX 78701

FEC ID number of contributing
federal political committee.

C C00143743

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25225.16

Date of Receipt

M M / D D / Y Y Y Y Y
12 19 2014

Transaction ID : SA12.19060

Amount of Each Receipt this Period

3806.63

IN-KIND: PAYROLL/PAYROLL TAXES

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

25225.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 70 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. REPUBLICAN PARTY OF VIRGINIA INC

Mailing Address 115 EAST GRACE STREET

City State Zip Code
RICHMOND VA 23219

FEC ID number of contributing
federal political committee.

C C00001305

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

389.30

Date of Receipt

11 / **21** / **2014**

Transaction ID : SA12.19047

Amount of Each Receipt this Period

389.30

In-kind - TRAVEL: AIR

Full Name (Last, First, Middle Initial)

B. REPUBLICAN PARTY OF VIRGINIA INC

Mailing Address 115 EAST GRACE STREET

City State Zip Code
RICHMOND VA 23219

FEC ID number of contributing
federal political committee.

C C00001305

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1014.30

Date of Receipt

11 / **21** / **2014**

Transaction ID : SA12.19050

Amount of Each Receipt this Period

625.00

IN-KIND: PAYROLL/PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. LINDA L. RISPONE

Mailing Address 18250 S. MISSION HILLS AVENUE

City State Zip Code
BATON ROUGE LA 70810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

HOMEMAKER

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

11 / **25** / **2014**

Transaction ID : SA12.22466

Amount of Each Receipt this Period

10000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1014.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 71 OF 187

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. SENATE BATTLEGROUND FUND

Mailing Address 228 S WASHINGTON ST STE 115

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

77400.00

Date of Receipt

12 / 01 / 2014

Transaction ID : SA12.19621

Amount of Each Receipt this Period

77400.00

Full Name (Last, First, Middle Initial)

B. SMILE STARS, LLC

Mailing Address 10522 S. GLENSTONE PLACE

City	State	Zip Code
BATON ROUGE	LA	70810

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

SMILE STARS, LLC

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2400.00

Date of Receipt

12 / 03 / 2014

Transaction ID : SA12.22493

Amount of Each Receipt this Period

2400.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MS. BARBARA S SMITH

Mailing Address 885 THIRD AVE 34TH FL

City	State	Zip Code
NEW YORK	NY	10022

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

SELF-EMPLOYED

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

11 / 24 / 2014

Transaction ID : SA12.19629

Amount of Each Receipt this Period

10000.00

SENATE BATTLEGROUND FUND TRANSFER

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

77400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 72 OF 187

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. TACO POLITICAL ACTION COMMITTEE

Mailing Address 6405 METCALF AVENUE, SUITE 503

City State Zip Code
SHAWNEE MISSION KS 66202

FEC ID number of contributing
federal political committee.

C C00330118

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

12 / **03** / **2014**

Transaction ID : SA12.22495

Amount of Each Receipt this Period

5000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. TENNESSEE REPUBLICAN PARTY FEDERAL ELECTION ACCOUNT

Mailing Address 2424 21ST AVENUE
SUITE 200

City State Zip Code
NASHVILLE TN 37212

FEC ID number of contributing
federal political committee.

C C00040220

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.70

Date of Receipt

12 / **03** / **2014**

Transaction ID : SA12.18979

Amount of Each Receipt this Period

307.70

In-kind - TRAVEL & TRANSPORTATION

Full Name (Last, First, Middle Initial)

C. TENNESSEE REPUBLICAN PARTY FEDERAL ELECTION ACCOUNT

Mailing Address 2424 21ST AVENUE
SUITE 200

City State Zip Code
NASHVILLE TN 37212

FEC ID number of contributing
federal political committee.

C C00040220

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2101.86

Date of Receipt

12 / **03** / **2014**

Transaction ID : SA12.18984

Amount of Each Receipt this Period

1794.16

INKIND: PAYROLL/PAYROLL TAXES

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2101.86

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 187

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. STEVEN A. WEBSTER

Mailing Address 500 DALLAS ST.
STE 2300

City	State	Zip Code
HOUSTON	TX	77002

FEC ID number of contributing
federal political committee.

C

Name of Employer

AVISTA CAPITAL PARTNERS

Occupation

CO-MANAGING PARTNER & CO-CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.22469

Amount of Each Receipt this Period

10000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ANDREA WYNN

Mailing Address 3131 LAS VEGAS BLVD S

City	State	Zip Code
LAS VEGAS	NV	89109

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.22475

Amount of Each Receipt this Period

10000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STEPHEN WYNN

Mailing Address 3131 LAS VEGAS BLVD S

City	State	Zip Code
LAS VEGAS	NV	89109

FEC ID number of contributing
federal political committee.

C

Name of Employer

WYNN RESORTS

Occupation

CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 03 / 2014

Transaction ID : SA12.22473

Amount of Each Receipt this Period

10000.00

JFC TRANSFER - CASSIDY VICTORY

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

1406965.70

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. AIRNET

Mailing Address PO BOX 11181

City CHATTANOOGA State TN Zip Code 37401

Purpose of Disbursement
TELEPHONE EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : SB21B.19085

Amount of Each Disbursement this Period

15349.08

Full Name (Last, First, Middle Initial)

B. AIRNET

Mailing Address PO BOX 11181

City CHATTANOOGA State TN Zip Code 37401

Purpose of Disbursement
TELEPHONE EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014
Transaction ID : SB21B.19086

Amount of Each Disbursement this Period

30052.38

Full Name (Last, First, Middle Initial)

C. AMERICA RISING LLC

Mailing Address 1555 WILSON BLVD STE 307

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
RESEARCH CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : SB21B.19088

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

46401.46

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MIKE ANDREWS

Mailing Address 7301 BYEFORD COURT

City SPRINGFIELD State VA Zip Code 22150

Purpose of Disbursement
ANDREWS REIMBURSEMENT: (SEE MEMO ENTRIES)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014
Transaction ID : SB21B.19212

Amount of Each Disbursement this Period

759.41

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 10156 PERKINS ROAD
SUITE 217F

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2014
Transaction ID : SB21B.19099

Amount of Each Disbursement this Period

49.53

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 10156 PERKINS ROAD
SUITE 217F

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SB21B.19100

Amount of Each Disbursement this Period

390.30

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1199.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. ANEDOTMailing Address 10156 PERKINS ROAD
SUITE 217F

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB21B.19101

Amount of Each Disbursement this Period

975.18

Full Name (Last, First, Middle Initial)

B. ANEDOTMailing Address 10156 PERKINS ROAD
SUITE 217F

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		04		2014

Transaction ID : SB21B.19102

Amount of Each Disbursement this Period

183.18

Full Name (Last, First, Middle Initial)

C. ANEDOTMailing Address 10156 PERKINS ROAD
SUITE 217F

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		09		2014

Transaction ID : SB21B.19103

Amount of Each Disbursement this Period

896.18

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2054.54

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2014
Transaction ID : SB21B.19113

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 19 / 2014
Transaction ID : SB21B.19114

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 20 / 2014
Transaction ID : SB21B.19115

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 80 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 20 2014
Transaction ID : SB21B.19116

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 21 2014
Transaction ID : SB21B.19117

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 21 2014
Transaction ID : SB21B.19118

Amount of Each Disbursement this Period

15.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

45.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. CHAIN BRIDGE BANK

Date of Disbursement

Transaction ID : SB21B.19119

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

15.00

B. CHAIN BRIDGE BANK

Date of Disbursement

Three digital displays showing the date 11/24/2014 in MM/DD/YYYY format. The first display shows '11' with 'M' indicators above. The second shows '24' with 'D' indicators above. The third shows '2014' with 'Y' indicators above.

Transaction ID : SB21B.19120

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

C. CHAIN BRIDGE BANK

Date of Disbursement

Transaction ID : SB21B.19121

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

45.00

[illegible]

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. CHAIN BRIDGE BANK

Date of Disbursement

Transaction ID : SB21B.19122

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

15.00

B. CHAIN BRIDGE BANK

Date of Disbursement

M M / D D / Y Y Y Y
11 26 2014

Transaction ID : SB21B.19123

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

C. CHAIN BRIDGE BANK

Date of Disbursement

Transaction ID : SB21B.19124

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.00
25-34	20.00
35-44	25.00
45-54	25.00
55-64	10.00
65-74	5.00
75+	45.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.19125

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.5%
25-34	10.5%
35-44	10.5%
45-54	10.5%
55-64	10.5%
65-74	10.5%
75-84	10.5%
85+	10.5%

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
12 03 2014

Transaction ID : SB21B.19126

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.00
25-34	10.00
35-44	10.00
45-54	10.00
55-64	10.00
65-74	10.00
75-84	10.00
85+	10.00

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVENUE

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.19127

Amount of Each Disbursement this Period

Food Item	Number of People
Pizza	10
Burger	8
Salad	5
Fruit	2

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

45.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. CHAIN BRIDGE BANK

Date of Disbursement

Transaction ID : SB21B.19128

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period



B. CHAIN BRIDGE BANK

Date of Disbursement

Transaction ID : SB21B.19129

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

C. CHAIN BRIDGE BANK

Date of Disbursement

Transaction ID : SB21B.19130

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

45.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. CHATEAU GOLF & COUNTRY CLUB

Date of Disbursement

Transaction ID : SB21B.19246

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

28.00

[MEMO ITEM]

B. CHEF KD LOUISIANA LEGENDS LLC

Date of Disbursement

M M / D D / Y Y Y Y
11 17 2014

Transaction ID : SB21B.19132

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

877.45

C. CHEF KD LOUISIANA LEGENDS LLC

Date of Disbursement

Transaction ID : SB21B.19133

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

1776.43

2653.88

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. CIRCLE K

Category/
Type

24.16

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

B. CITY OF MONROE UTILITY

M M / D D / Y Y Y Y
11 17 2014

Category/
Type

52.84

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

C. CJY STRATEGIES

Category/
Type

7500.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

7500.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. CLECO POWER/EZ-PAY

Category/
Type

198.52

Office Sought:	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify) ▼	
	<input type="checkbox"/> President			
State:	District:			

B. COLORADO REPUBLICAN COMMITTEE

Category/
Type

6647.80

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. COMMUNICATIONS CORPORATION OF AMERICA

Category/
Type

2670.57

Office Sought:	<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify) ▼	
	<input type="checkbox"/> President			
State:	District:			

9318.37

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. CONSERVATIVE CONNECTOR

Mailing Address 435 E MAIN ST STE 250

City	State	Zip Code
GREENWOOD	IN	46143

Purpose of Disbursement

FUNDRAISING CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.19137

Amount of Each Disbursement this Period

10550.49

Full Name (Last, First, Middle Initial)

B. CONSERVATIVE CONNECTOR

Mailing Address 435 E MAIN ST STE 250

City	State	Zip Code
GREENWOOD	IN	46143

Purpose of Disbursement

FUNDRAISING CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.19138

Amount of Each Disbursement this Period

2170.13

Full Name (Last, First, Middle Initial)

C. CREATIVE DIRECT LLC

Mailing Address 25 E. MAIN STREET

City	State	Zip Code
RICHMOND	VA	23219

Purpose of Disbursement
DIRECT MAIL PRINTING - NO IDENTIFIED CANDIDATE

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.19139

Amount of Each Disbursement this Period

8685.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

21405.62

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 89 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. CREATIVE DIRECT LLC

Mailing Address 25 E. MAIN STREET

City RICHMOND State VA Zip Code 23219

Purpose of Disbursement
DIRECT MAIL PRINTING - NO IDENTIFIED CANDIDATE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : SB21B.19140

Amount of Each Disbursement this Period

23577.00

Full Name (Last, First, Middle Initial)

B. SARAH DAKE

Mailing Address 1525 NORTH BERTRAND

City LAFAYETTE State LA Zip Code 70506

Purpose of Disbursement
DAKE REIMBURSEMENT: TRAVEL MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : SB21B.19268

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. SARAH DAKE

Mailing Address 1525 NORTH BERTRAND

City LAFAYETTE State LA Zip Code 70506

Purpose of Disbursement
DAKE REIMBURSEMENT: (SEE MEMO ENTRIES)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : SB21B.19269

Amount of Each Disbursement this Period

385.55

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24462.55

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. SARAH DAKE

Mailing Address 1525 NORTH BERTRAND

City	State	Zip Code
LAFAYETTE	LA	70506

Purpose of Disbursement
DAKE REIMBURSEMENT: TRAVEL MILEAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2014

Transaction ID : SB21B.19270

Amount of Each Disbursement this Period

289.73

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DIRECT MAILING SERVICES, INC.

Mailing Address 12562 N. LAKE SHORE

City	State	Zip Code
WALKER	LA	70785

Purpose of Disbursement
DIRECT MAIL CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB21B.19141

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

C. DIRECT MAILING SERVICES, INC.

Mailing Address 12562 N. LAKE SHORE

City	State	Zip Code
WALKER	LA	70785

Purpose of Disbursement
DIRECT MAIL CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2014

Transaction ID : SB21B.19142

Amount of Each Disbursement this Period

6000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

12000.00

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. DOLLAR RENT A CAR

Date of Disbursement

Transaction ID : SB21B.19217

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

76.65

[MEMO ITEM]

B. JASON DORE

Date of Disbursement

M M / D D / Y Y Y Y
12 05 2014

Transaction ID : SB21B.19169

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

36.79

C. JASON DORE

Date of Disbursement

Transaction ID : SB21B.19170

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10
25-34	15
35-44	20
45-54	25
55-64	30
65-74	35
75-84	40
85+	80

116.79

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 92 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. DOUBLE TREE HOTEL

Mailing Address 2150 VETERANS BLVD

City
KENNERState
LAZip Code
70062Purpose of Disbursement
VILLERE REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

Transaction ID : SB21B.19253

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DOWNMAN GAS

Mailing Address 5855 CHEF HWY

City
NEW ORLEANSState
LAZip Code
70126Purpose of Disbursement
ANDREWS REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : SB21B.19219

Amount of Each Disbursement this Period

14.72

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DS SERVICES STANDARD COFFEE

Mailing Address 4535 BENNINGTON AVE

City
BATON ROUGEState
LAZip Code
70808Purpose of Disbursement
VISA PAYMENT: MEETING EXPENSE: MEALS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB21B.19307

Amount of Each Disbursement this Period

88.37

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 93 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. EIFFEL SOCIETY

Mailing Address 2040 SAINT CHARLES AVE

City NEW ORLEANS State LA Zip Code 70130

Purpose of Disbursement
VILLERE REIMBURSEMENT: TRAVEL: FOOD

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : SB21B.19248

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JORDAN ELSBURYMailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
ELSBURY REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : SB21B.19195

Amount of Each Disbursement this Period

680.00

Full Name (Last, First, Middle Initial)

C. JORDAN ELSBURYMailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
ELSBURY REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : SB21B.19196

Amount of Each Disbursement this Period

680.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1360.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. FEDERAL EXPRESS

Mailing Address PO BOX 660481

City
DALLASState
TXZip Code
75266-0481Purpose of Disbursement
DELIVERY SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

Transaction ID : SB21B.19149

Amount of Each Disbursement this Period

290.52

Full Name (Last, First, Middle Initial)

B. FIRST GRAPHIX

Mailing Address 11401 INDUSTRIPLEX BLVD STE 1

City
BATON ROUGEState
LAZip Code
70809Purpose of Disbursement
PRINTING & DESIGN SE RVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Transaction ID : SB21B.19151

Amount of Each Disbursement this Period

763.00

Full Name (Last, First, Middle Initial)

C. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD STE 270

City
SAINT PAULState
MNZip Code
55128Purpose of Disbursement
TELEMARKETING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Transaction ID : SB21B.19152

Amount of Each Disbursement this Period

25000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

26053.52

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD STE 270

City	State	Zip Code
SAINT PAUL	MN	55128

Purpose of Disbursement
TELEMARKETING

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.19153

Amount of Each Disbursement this Period

4054.35

B. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD STE 270

City	State	Zip Code
SAINT PAUL	MN	55128

Purpose of Disbursement
TELEMARKETING

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M / D D / Y Y Y Y
12 05 2014

Transaction ID : SB21B.19154

Amount of Each Disbursement this Period

53403.00

C. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD STE 270

City	State	Zip Code
SAINT PAUL	MN	55128

Purpose of Disbursement
TELEMARKETING

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Three digital displays are shown side-by-side. The first display shows '12' with two small squares above it. The second display shows '18' with two small squares above it. The third display shows '2014' with four small squares above it.

Transaction ID : SB21B.19155

Amount of Each Disbursement this Period

19075.05

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

76532.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 96 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. KAITLIN O. FORAN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

Mailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
FORAN REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Category/
Type**Transaction ID : SB21B.19197**

Amount of Each Disbursement this Period

499.66

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. KAITLIN O. FORAN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2014

Mailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
FORAN REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Category/
Type**Transaction ID : SB21B.19198**

Amount of Each Disbursement this Period

499.92

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FRENCH MKT PARKING LOT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Mailing Address 1235 NORTH PETERS STREET

City NEW ORLEANS State LA Zip Code 70116

Purpose of Disbursement
VISA PAYMENT: PARKING SERVICES

Candidate Name

Category/
Type**Transaction ID : SB21B.19302**

Amount of Each Disbursement this Period

14.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

999.58

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 97 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. GEORGIA REPUBLICAN PARTY

Mailing Address P. O. BOX 550008

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement
In-kind - TRAVEL: AIR

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 03 / 2014
Transaction ID : SB21B.18978

Amount of Each Disbursement this Period

5436.00

Full Name (Last, First, Middle Initial)

B. HUNTER HALL

Mailing Address 38129 SPRINGWOOD AVE

City PRARIEVILLE State LA Zip Code 70769

Purpose of Disbursement
HALL REIMBURSEMENT: (SEE MEMO ENTRIES)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : SB21B.19156

Amount of Each Disbursement this Period

653.88

Full Name (Last, First, Middle Initial)

C. HUNTER HALL

Mailing Address 38129 SPRINGWOOD AVE

City PRARIEVILLE State LA Zip Code 70769

Purpose of Disbursement
HALL REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : SB21B.19157

Amount of Each Disbursement this Period

500.03

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6089.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 99 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. HUNTER HALL

Mailing Address 38129 SPRINGWOOD AVE

City PRARIEVILLE State LA Zip Code 70769

Purpose of Disbursement
HALL REIMBURSEMENT: INSURANCE STIPEND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 19 2014
Transaction ID : SB21B.19164

Amount of Each Disbursement this Period

152.88

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BRONWYN HALTOM

Mailing Address 7630 WEST ML AVE

City KALAMAZOO State MI Zip Code 49009

Purpose of Disbursement
HALTOM REIMBURSEMENT: (SEE MEMO ENTRIES)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 17 2014
Transaction ID : SB21B.19106

Amount of Each Disbursement this Period

486.98

Full Name (Last, First, Middle Initial)

C. JACK HERETIK

Mailing Address 396 SANDHURST ROAD

City AKRON State OH Zip Code 44333

Purpose of Disbursement
HERETIK REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y
12 05 2014
Transaction ID : SB21B.19167

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

986.98

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. JACK HERETIK

Mailing Address 396 SANDHURST ROAD

City	State	Zip Code
AKRON	OH	44333

Purpose of Disbursement
HERETIK REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

Transaction ID : SB21B.19168

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. ERIN HUFFAKER

Mailing Address 3858 SOUTHPASS AVE

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement	HUFFAKER REIMBURSEMENT: POSTAGE
-------------------------	---------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 05 2014

Transaction ID : SB21B.19143

Amount of Each Disbursement this Period

9.80

Full Name (Last, First, Middle Initial)

C. ERIN HUFFAKER

Mailing Address 3858 SOUTHPASS AVE

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
HUFFAKER REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

Transaction ID : SB21B.19144

Amount of Each Disbursement this Period

37.88

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

547.68

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. ERIN HUFFAKER

Mailing Address 3858 SOUTHPASS AVE

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
HUFFAKER REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Date of Disbursement

Transaction ID : SB21B.19145

Amount of Each Disbursement this Period

57.12

Full Name (Last, First, Middle Initial)

B. ERIN HUFFAKER

Mailing Address 3858 SOUTHPASS AVE

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement	HUFFAKER REIMBURSEMENT: TRAVEL: FUEL
-------------------------	--------------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.19146

Amount of Each Disbursement this Period

58.23

Full Name (Last, First, Middle Initial)

C. ERIN HUFFAKER

Mailing Address 3858 SOUTHPASS AVE

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement	HUFFAKER REIMBURSEMENT: TRAVEL: FUEL
-------------------------	--------------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

Transaction ID : SB21B.19147

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	~10.5
25-34	~15.5
35-44	~20.5
45-54	~25.5
55-64	~30.5
65-74	60.35
75-84	~10.5
85+	~10.5

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

175.70

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. ERIN HUFFAKER

Category/
Type

200.00

State: District:

B. IBERIA BANK

M M / D D / Y Y Y Y
11 20 2014

Category/
Type

487.88

State: District:

C. IBERIA BANK

Category/
Type

416.47

State: District:

1104.35

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 104 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. KIM JANCA

Mailing Address 6132 W AZALEA DR

City	State	Zip Code
LAKE CHARLES	LA	70605

Purpose of Disbursement
JANCA REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2014

Transaction ID : SB21B.19200

Amount of Each Disbursement this Period

496.64

Full Name (Last, First, Middle Initial)

B. NORMAN VAN JONATHAN

Mailing Address 4820 CYPRESS LAKE DR

City	State	Zip Code
LAKE CHARLES	LA	70611

Purpose of Disbursement
NORMAN REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : SB21B.19194

Amount of Each Disbursement this Period

303.29

Full Name (Last, First, Middle Initial)

C. KIRSTIN HOPKINS INC

Mailing Address 6059 KENWOOD AVE

City	State	Zip Code
DALLAS	TX	75205

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		20		2014

Transaction ID : SB21B.19201

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1799.93

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

Category/
Type

775.00

Category/
Type

Category	Percentage
Do not use a mobile phone	50.70

Category/
Type

600.00

1375.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 106 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MARIOTT GARDEN INN

Mailing Address 2015 OLD MINDIN RD

City	State	Zip Code
BOSSIER	LA	71111

Purpose of Disbursement
HALTOM REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : SB21B.19108

Amount of Each Disbursement this Period

52.46

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MARYLAND REPUBLICAN STATE CENTRAL COMMITTEE

Mailing Address P.O. BOX 631

City	State	Zip Code
ANNAPOLIS	MD	21404

Purpose of Disbursement
In-kind - TRAVEL & TRANSPORTATION

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB21B.26602

Amount of Each Disbursement this Period

413.15

Full Name (Last, First, Middle Initial)

C. MELE PRINTING

Mailing Address 619 N TYLER ST

City	State	Zip Code
COVINGTON	LA	70433

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2014

Transaction ID : SB21B.19209

Amount of Each Disbursement this Period

23192.41

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

23605.56

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. MELE PRINTING

Mailing Address 619 N TYLER ST

City	State	Zip Code
COVINGTON	LA	70433

Purpose of Disbursement
PRINTING & DESIGN SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.19210

Amount of Each Disbursement this Period



442.70

Full Name (Last, First, Middle Initial)

B. MR. ED'S OYSTER BAR & FISH HOUSE

Mailing Address 3117 21ST STREET

City	State	Zip Code
METAIRE	LA	70002

Purpose of Disbursement	VILLERE REIMBURSEMENT: TRAVEL: FOOD
-------------------------	-------------------------------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.19251

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.00
25-34	15.00
35-44	12.00
45-54	18.00
55-64	14.00
65-74	16.00
75-84	11.00
85+	13.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JONAH MUMPHREY

Mailing Address 11335 ARCHERY DR

City	State	Zip Code
BATON ROUGE	LA	70815

Purpose of Disbursement
MUMPHREY REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.19191

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

942.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 108 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JONAH MUMPHREY

Mailing Address 11335 ARCHERY DR

City	State	Zip Code
BATON ROUGE	LA	70815

Purpose of Disbursement
MUMPHREY REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2014

Transaction ID : SB21B.19192

Amount of Each Disbursement this Period

499.46

Full Name (Last, First, Middle Initial)

B. NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

Mailing Address 10 WATER STREET

City	State	Zip Code
CONCORD	NH	03301

Purpose of Disbursement
In-kind - TRAVEL & TRANSPORTATION

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB21B.19004

Amount of Each Disbursement this Period

4054.95

Full Name (Last, First, Middle Initial)

C. NEW JERSEY REPUBLICAN STATE COMMITTEE

Mailing Address 28 WEST STATE STREET SUITE 319

City	State	Zip Code
TRENTON	NJ	08608

Purpose of Disbursement
In-kind - TRAVEL & TRANSPORTATION

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

Transaction ID : SB21B.18990

Amount of Each Disbursement this Period

620.30

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5174.71

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. SPENCER NICHOLS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

Mailing Address 4000 LAKE BEAU PTRE BLVD #99

City	State	Zip Code
BATON ROUGE	LA	70820

Transaction ID : SB21B.19274Purpose of Disbursement
NICHOLS REIMBURSEMENT: TRAVEL: MILEAGE

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

841.71

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. NORTH CAROLINA REPUBLICAN PARTY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Mailing Address 1506 HILLSBOROUGH STREET

City	State	Zip Code
RALEIGH	NC	27605

Transaction ID : SB21B.19014Purpose of Disbursement
In-kind - TRAVEL & TRANSPORTATION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

10303.10

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. OAK POINT FRESH MAR

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Mailing Address 14485 GREENWELL SPRINGS ROAD

City	State	Zip Code
GREENWELL SPRINGS	LA	70739

Transaction ID : SB21B.19314Purpose of Disbursement
VISA PAYMENT: MEETING EXPENSE: MEALS

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

34.87

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶

11144.81

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 110 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Mailing Address 211 S. FIFTH STREET

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement
In-kind - TRAVEL & TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 01 / 2014
Transaction ID : SB21B.19019

Amount of Each Disbursement this Period

2705.70

Full Name (Last, First, Middle Initial)

B. OMNI HOTELS

Mailing Address 621 SAINT LOUIS STREET

City NEW ORLEANS State LA Zip Code 70130

Purpose of Disbursement
VISA PAYMENT: PARKING SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2014
Transaction ID : SB21B.19300

Amount of Each Disbursement this Period

12.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. OPTIMUS CONSULTING LLCMailing Address 611 PENNSYLVANIA SE
BOX 269

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : SB21B.19221

Amount of Each Disbursement this Period

55000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

57705.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 111 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. PC INVESTMENTS INC

Mailing Address 2216 FORSYTHE AVE SUITE B

City	State	Zip Code
MONROE	LA	71201

Purpose of Disbursement
RENT

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SB21B.19222

Amount of Each Disbursement this Period

1079.16

Full Name (Last, First, Middle Initial)

B. PELICAN BUS LLC

Mailing Address 3500 UPPERLINE ST

City	State	Zip Code
NEW ORLEANS	LA	70125

Purpose of Disbursement
TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	18	/	2014

Transaction ID : SB21B.19224

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

C. PRINTING TECH

Mailing Address 11930 HARRELL'S FERRY ROAD

City	State	Zip Code
BATON ROUGE	LA	70816-2368

Purpose of Disbursement
PRINTING & DESIGN SE RVICES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	09	/	2014

Transaction ID : SB21B.19225

Amount of Each Disbursement this Period

5819.35

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8098.51

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. RED CURVE SOLUTIONS

MM / DD / YYYY

Category/
Type

15.85

State: District:

B. REPUBLICAN FEDERAL COMMITTEE OF PENNSYLVANIA

Category/
Type

State: District:

C. REPUBLICAN PARTY OF FLORIDA

MM / DD / YYYY

Category/
Type

State: District:

3906.69

12847.44

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. REPUBLICAN PARTY OF FLORIDA

Mailing Address 420 E. JEFFERSON STREET

City	State	Zip Code
TALLAHASSEE	FL	32301

Purpose of Disbursement
In-kind - TRAVEL & TRANSPORTATION

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.19053

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. REPUBLICAN PARTY OF VIRGINIA INC

Mailing Address 115 EAST GRACE STREET

City	State	Zip Code
RICHMOND	VA	23219

Purpose of Disbursement
In-kind - TRAVEL: AIR

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.19049

Amount of Each Disbursement this Period

Age Group	Number of People
13-17	~100
18-24	389.30
25-34	~150
35-44	~120
45-54	~100
55-64	~80
65-74	~60
75-84	~40
85+	~20

Full Name (Last, First, Middle Initial)

C. JOAN REYNOLDS

Mailing Address 3709 WYNGATE COVE

City	State	Zip Code
BIRMINGHAM	AL	35242

Purpose of Disbursement
REYNOLDS REIMBURSEMENT: (SEE MEMO ENTRIES)

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.19174

Amount of Each Disbursement this Period

2990.71

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4880.01

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. ROYAL CHINA RESTAURANT

Date of Disbursement

Transaction ID : SB21B.19238

Amount of Each Disbursement this Period

Category/
Type

26.50

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RUTH'S CHRIS STEAKHOUSE

Date of Disbursement

M M / D D / Y Y Y Y
12 05 2014

Mailing Address 3633 VETERANS MEM BLVD

City	State	Zip Code
METAIRE	LA	70002

Transaction ID : SB21B.19255

Purpose of Disbursement
VILLERE REIMBURSEMENT: TRAVEL: FOOD

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

40.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

[MEMO ITEM]

State: District:

Full Name (Last, First, Middle Initial)

C. SHELL

Date of Disbursement

Mailing Address 11440 PERKINS ROAD

City	State	Zip Code
BATON ROUGE	LA	70810

Transaction ID : SB21B.19305

Purpose of Disbursement
VISA PAYMENT: TRAVEL: FUEL

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

43.55

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 117 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. SHELL

Mailing Address 11440 PERKINS ROAD

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement
VISA PAYMENT: TRAVEL: FUEL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		17		2014

Transaction ID : SB21B.19316

Amount of Each Disbursement this Period

18.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SHELL

Mailing Address 11440 PERKINS ROAD

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement
VILLERE REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B.19236

Amount of Each Disbursement this Period

30.25

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SHELL

Mailing Address 11440 PERKINS ROAD

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement
VILLERE REIMBURSEMENT: TRAVEL: FUEL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		25		2014

Transaction ID : SB21B.19239

Amount of Each Disbursement this Period

35.82

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. SHELL

Category/
Type

37.44

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

B. SHELL

Category/
Type

30.27

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

C. SHELL

Category/
Type

28.29

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

0.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. SHELL

City	State	Zip Code
BATON ROUGE	LA	70810

Transaction ID : SB21B.19258

Age Group	Percentage
18-24	10.0%
25-34	15.0%
35-44	20.0%
45-54	25.0%
55-64	30.0%
65-74	35.0%
75-84	40.0%
85+	45.0%

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SHELL

M M / D D / Y Y Y Y
12 05 2014

City	State	Zip Code
BATON ROUGE	LA	70810

Transaction ID : SB21B.19260

31.87

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SHELL

City	State	Zip Code
BATON ROUGE	LA	70810

Transaction ID : SB21B.19261

34.04

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

[MEMO ITEM]

0.00

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. SHELL

Category/
Type

31.53

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

B. SHOGUN

MM / DD / YYYY

Category/
Type

50.36

Office Sought: <div style="display: flex; flex-direction: column; align-items: flex-start;"> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div>	Disbursement For: <div style="display: flex; flex-direction: column; align-items: flex-start;"> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div>
State:	District:

C. SHOGUN

Category/
Type

67.55

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 121 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. SILVER BULLET LLC

Mailing Address 746EAST WINCHESTER ST STE 140

City SALT LAKE CITY State UT Zip Code 84107

Purpose of Disbursement
VOLUNTEER RECRUITMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2014
Transaction ID : SB21B.19273

Amount of Each Disbursement this Period

50592.00

Full Name (Last, First, Middle Initial)

B. SLEEP INN & SUITES METAIRIE

Mailing Address 4601 NORTH I-10 SERVICE ROAD

City METAIRIE State LA Zip Code 70006

Purpose of Disbursement
REYNOLDS REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : SB21B.19190

Amount of Each Disbursement this Period

2670.77

Full Name (Last, First, Middle Initial)

C. SOHO ASIAN CUISINE

Mailing Address 601 VETERANS MEMORIAL BLVD

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT: TRAVEL: FOOD

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : SB21B.19237

Amount of Each Disbursement this Period

28.47

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

53262.77

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. SOHO ASIAN CUISINE

Transaction ID : SB21B.19256

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

35.80

[MEMO ITEM]

B. SOHO ASIAN CUISINE

Date of Disbursement

M M / D D / Y Y Y Y
12 05 2014

Transaction ID : SB21B.19259

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

40.26

[MEMO ITEM]

C. SOUTHWEST AIRLINES

Date of Disbursement

Transaction ID : SB21B.19213

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

525.70

[MEMO ITEM]

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 124 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JEFFREY BRANT STIDHAM

Mailing Address 13322 BRIARGROVE DRIVE

City State Zip Code
 BATON ROUGE LA 70810

Purpose of Disbursement
 STIDHAM REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
 12 19 2014

Transaction ID : SB21B.19171

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. AUSTIN STUKINS

Mailing Address 1817 OLIVE ST

City State Zip Code
 BATON ROUGE LA 70802

Purpose of Disbursement
 FIELD CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
 12 20 2014

Transaction ID : SB21B.19084

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. SUPER 8

Mailing Address 6322 CHEF MENTEUR HWY

City State Zip Code
 NEW ORLEANS LA 70126

Purpose of Disbursement
 ANDREWS REIMBURSEMENT: TRAVEL: LODGING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
 12 17 2014

Transaction ID : SB21B.19215

Amount of Each Disbursement this Period

142.34

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 125 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. TARGET OUTREACH INC

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Mailing Address 700 W VIRGINIA ST SUITE 700
TIMBERS BUILDING

City MILWAUKEE State WI Zip Code 53204

Purpose of Disbursement
LIST ACQUISITION

Candidate Name

Category/
Type**Transaction ID : SB21B.19275**

Amount of Each Disbursement this Period

6565.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. TENNESSEE REPUBLICAN PARTY FEDERAL ELECTION ACCOUNT

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Mailing Address 2424 21ST AVENUE
SUITE 200

City NASHVILLE State TN Zip Code 37212

Purpose of Disbursement
In-kind - TRAVEL & TRANSPORTATION

Candidate Name

Category/
Type**Transaction ID : SB21B.18981**

Amount of Each Disbursement this Period

307.70

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. THE BULLDOG

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
1	2	3		4	5	6		7	8	9	0	1	2

Mailing Address 4385 PERKINS ROAD

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement
AMEX PAYMENT: MEETING EXPENSE: MEALS

Candidate Name

Category/
Type**Transaction ID : SB21B.19098**

Amount of Each Disbursement this Period

4209.06

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6872.70

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 126 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. THE STEAK KNIFE

Mailing Address 888 HARRISON AVE

City NEW ORLEANS State LA Zip Code 70126

Purpose of Disbursement
VILLERE REIMBURSEMENT: TRAVEL: FOOD

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : SB21B.19263

Amount of Each Disbursement this Period

99.96

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. TRANSAXT

Mailing Address 190 MONROE AVE

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 24 / 2014
Transaction ID : SB21B.19279

Amount of Each Disbursement this Period

934.29

Full Name (Last, First, Middle Initial)

C. TRANSAXT

Mailing Address 190 MONROE AVE

City GRAND RAPIDS State MI Zip Code 49503

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 23 / 2014
Transaction ID : SB21B.19280

Amount of Each Disbursement this Period

204.66

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1138.95

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

Transaction ID : SB21B.19281

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

17135.22

B. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

Transaction ID : SB21B.19282

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

29082.52

C. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

Three digital displays are shown, each with a different number of segments missing (indicated by grey squares). The first display shows '11' with 2 missing segments. The second display shows '21' with 2 missing segments. The third display shows '2014' with 4 missing segments.

Transaction ID : SB21B.19283

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

45436.59

91654.33

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 128 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Mailing Address PO BOX 262100

City	State	Zip Code
BATON ROUGE	LA	70826

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type**Transaction ID : SB21B.19284**

Amount of Each Disbursement this Period

45437.02

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		23		2014

Mailing Address PO BOX 262100

City	State	Zip Code
BATON ROUGE	LA	70826

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type**Transaction ID : SB21B.19285**

Amount of Each Disbursement this Period

3251.17

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		23		2014

Mailing Address PO BOX 262100

City	State	Zip Code
BATON ROUGE	LA	70826

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type**Transaction ID : SB21B.19286**

Amount of Each Disbursement this Period

45436.59

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

94124.78

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 129 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
1	1		2	4		2	0	1	4		

Mailing Address PO BOX 262100

City	State	Zip Code
BATON ROUGE	LA	70826

Transaction ID : SB21B.19287Purpose of Disbursement
POSTAGE

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

29082.52

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
1	1		2	6		2	0	1	4		

Mailing Address PO BOX 262100

City	State	Zip Code
BATON ROUGE	LA	70826

Transaction ID : SB21B.19288Purpose of Disbursement
POSTAGE

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

18969.53

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

M	M		D	D		Y	Y	Y	Y		
1	1		2	6		2	0	1	4		

Mailing Address PO BOX 262100

City	State	Zip Code
BATON ROUGE	LA	70826

Transaction ID : SB21B.19289Purpose of Disbursement
POSTAGE

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

18969.53

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

67021.58

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

Transaction ID : SB21B.19290

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

18969.53

B. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

M M / D D / Y Y Y Y
11 26 2014

Transaction ID : SB21B.19291

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

38928.85

C. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

Transaction ID : SB21B.19292

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

38928.85

96827.23

[illegible]

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

Transaction ID : SB21B.19293

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period



B. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

M M / D D / Y Y Y Y
12 10 2014

Transaction ID : SB21B.19294

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

C. US POSTAL SERVICE - BUSINESS MAIL ENTRY OFFICE

Date of Disbursement

Transaction ID : SB21B.19295

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

500.00

1500.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF LOUISIANA

A. USPS

City	State	Zip Code
BATON ROUGE	LA	70821-2100

Purpose of Disbursement	VISA PAYMENT: POSTAGE
-------------------------	-----------------------

Candidate Name

25.55

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Category/
Type

[MEMO ITEM]

State: District:

B. USPS

City	State	Zip Code
BATON ROUGE	LA	70821-2100

Transaction ID : SB21B.19308

Purpose of Disbursement	VISA PAYMENT: POSTAGE
-------------------------	-----------------------

Candidate Name

12.70

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Category/
Type

[MEMO ITEM]

State: District:

C. USPS

Three digital displays are shown, each with a label above it: 'M' for the first display showing '11', 'D' for the second display showing '17', and 'Y' for the third display showing '2014'. The displays are arranged horizontally and separated by slashes.

City	State	Zip Code
BATON ROUGE	LA	70821-2100

Transaction ID : SB21B.19315

Purpose of Disbursement
VISA PAYMENT: POSTAGE

Candidate Name

2.87

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Category/
Type

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

REPUBLICAN PARTY OF LOUISIANA

A. USPS

Category/
Type

5.95

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

B. USPS

M M / D D / Y Y Y Y
11 28 2014

Category/
Type

5984.00

Office Sought: <div style="display: flex; flex-direction: column; align-items: flex-start;"> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div>	Disbursement For: <div style="display: flex; flex-direction: column; align-items: flex-start;"> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div>
State:	District:

C. USPS

Category/
Type

3808.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Age Group	Percentage
18-24	~1.5
25-34	~2.5
35-44	~3.5
45-54	~4.5
55-64	~3.5
65+	~2.5

[illegible]

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 134 OF 187

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address PO BOX 2100

City

BATON ROUGE

State

LA

Zip Code

70821-2100

Purpose of Disbursement

AMEX PAYMENT: POSTAGE

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : SB21B.19094

Amount of Each Disbursement this Period

588.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address PO BOX 2100

City

BATON ROUGE

State

LA

Zip Code

70821-2100

Purpose of Disbursement

AMEX PAYMENT: POSTAGE

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : SB21B.19095

Amount of Each Disbursement this Period

5100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address PO BOX 2100

City

BATON ROUGE

State

LA

Zip Code

70821-2100

Purpose of Disbursement

AMEX PAYMENT: POSTAGE

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

Transaction ID : SB21B.19096

Amount of Each Disbursement this Period

680.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 135 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. VERVEMAIL

Mailing Address 5348 VEGAS DR. STE. 289

City LAS VEGAS State NV Zip Code 89108

Purpose of Disbursement
WEB DEVELOPMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : SB21B.19296

Amount of Each Disbursement this Period

1380.13

Full Name (Last, First, Middle Initial)

B. MR. ROGER VILLERE

Mailing Address 838 AURORA ST

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT: (SEE MEMO ENTRIES)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2014
Transaction ID : SB21B.19233

Amount of Each Disbursement this Period

287.55

Full Name (Last, First, Middle Initial)

C. MR. ROGER VILLERE

Mailing Address 838 AURORA ST

City METAIRIE State LA Zip Code 70005

Purpose of Disbursement
VILLERE REIMBURSEMENT: (SEE MEMO ENTRIES)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 05 / 2014
Transaction ID : SB21B.19249

Amount of Each Disbursement this Period

541.37

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2209.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 136 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. VISA

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	7			2	0	1	4		

Mailing Address 595 MARKET STREETCITY

City	State	Zip Code
SAN FRANCISCO	CA	94105

Transaction ID : SB21B.19298Purpose of Disbursement
VISA PAYMENT: LATE PAYMENT FEE

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

15.00

[MEMO ITEM]

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. VISA BUSINESS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	7			2	0	1	4		

Mailing Address P.O. BOX 23078

City	State	Zip Code
COLUMBUS	GA	31902

Transaction ID : SB21B.19297Purpose of Disbursement
VISA PAYMENT: (SEE MEMO ENTRIES)

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

41.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. VISA BUSINESS

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			1	7			2	0	1	4		

Mailing Address P.O. BOX 23078

City	State	Zip Code
COLUMBUS	GA	31902

Transaction ID : SB21B.19303Purpose of Disbursement
VISA PAYMENT: (SEE MEMO ENTRIES)

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

534.42

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

575.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 137 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. VISA BUSINESS

Mailing Address P.O. BOX 23078

City COLUMBUS State GA Zip Code 31902

Purpose of Disbursement
VISA PAYMENT: (SEE MEMO ENTRIES)

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 19 2014
Transaction ID : SB21B.19318

Amount of Each Disbursement this Period

1322.00

Full Name (Last, First, Middle Initial)

B. VISA BUSINESS

Mailing Address P.O. BOX 23078

City COLUMBUS State GA Zip Code 31902

Purpose of Disbursement
VISA PAYMENT: (SEE MEMO ENTRIES)

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 19 2014
Transaction ID : SB21B.19319

Amount of Each Disbursement this Period

4222.21

Full Name (Last, First, Middle Initial)

C. WALMART

Mailing Address 10200 SULLIVAN RD

City BATON ROUGE State LA Zip Code 70810

Purpose of Disbursement
TRAVEL STIPEND GIFT CARDS

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 21 2014
Transaction ID : SB21B.19320

Amount of Each Disbursement this Period

26267.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

31811.21

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 139 OF 187

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. KRISTY L. WILKINSON

Mailing Address 822 LOUISIANA AVE APT 822B

City NEW ORLEANS State LA Zip Code 70115

Purpose of Disbursement
WILKINSON REIMBURSEMENT: TRAVEL: MILEAGE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014
Transaction ID : SB21B.19203

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. YELLOW CHECKER CAB

Mailing Address 3801 SHED RD

City BOSSIER State LA Zip Code 71111

Purpose of Disbursement
HALTOM REIMBURSEMENT: TRAVEL: GROUND TRANSPORTATION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 17 / 2014
Transaction ID : SB21B.19110

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

904644.67

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MR. GREGORY HAMER

Mailing Address PO BOX 3608

City	State	Zip Code
MORGAN CITY	LA	70381

Purpose of Disbursement
CONTRIBUTION REFUND:TRANSFERRED FUNDS

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	04	/	2014

Transaction ID : SB28A.26566

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00

500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. DUSTIN BREWSTER

Mailing Address 550 LEE DR APT 235

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19329

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. KATHERINE D BROWN

Mailing Address PO BOX 729

City	State	Zip Code
SPRINGFIELD	LA	70462

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19374

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. KATHERINE D BROWN

Mailing Address PO BOX 729

City	State	Zip Code
SPRINGFIELD	LA	70462

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19375

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. SARAH BRYSON

Mailing Address 106 OAK CREST DR

City	State	Zip Code
LAFAYETTE	LA	70503

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SB30B.19386

Amount of Each Disbursement this Period

125.00

Full Name (Last, First, Middle Initial)

B. SARAH BRYSON

Mailing Address 106 OAK CREST DR

City	State	Zip Code
LAFAYETTE	LA	70503

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2014

Transaction ID : SB30B.19387

Amount of Each Disbursement this Period

125.00

Full Name (Last, First, Middle Initial)

C. LUNDEN ALYSSA CHENEVERTMailing Address 530 LAKELAND DRIVE
SUITE 215

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : SB30B.19334

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

250.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 143 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. LUNDEN ALYSSA CHENEVERT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	12	/	2014

Mailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type**Transaction ID : SB30B.19354**

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. COLORADO REPUBLICAN COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	21	/	2014

Mailing Address 5950 S. WILLOW DRIVE
SUITE 302

City GREENWOOD VILLAGE State CO Zip Code 80111

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19028 INKIND

Candidate Name

Category/
Type**Transaction ID : SB30B.19029**

Amount of Each Disbursement this Period

66300.00

[MEMO ITEM]Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. KAREN F. CONNOLLY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Mailing Address 6880 CHRISTOPHER AVE.

City GREENWELL SPRINGS State LA Zip Code 70739

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type**Transaction ID : SB30B.19335**

Amount of Each Disbursement this Period

1500.00

[MEMO ITEM]Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

66300.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 144 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. KAREN F. CONNOLLY

Mailing Address 6880 CHRISTOPHER AVE.

City	State	Zip Code
GREENWELL SPRINGS	LA	70739

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19355

Amount of Each Disbursement this Period

1500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. KAREN F. CONNOLLY

Mailing Address 6880 CHRISTOPHER AVE.

City	State	Zip Code
GREENWELL SPRINGS	LA	70739

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		20		2014

Transaction ID : SB30B.19373

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. SARAH DAKE

Mailing Address 1525 NORTH BERTRAND

City	State	Zip Code
LAFAYETTE	LA	70506

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19336

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 145 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. SARAH DAKE

Mailing Address 1525 NORTH BERTRAND

City	State	Zip Code
LAFAYETTE	LA	70506

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19356

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MADELEINE DAVIS

Mailing Address 2107 ANN LANE

City	State	Zip Code
OAKDALE	LA	71463

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19378

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. MADELEINE DAVIS

Mailing Address 2107 ANN LANE

City	State	Zip Code
OAKDALE	LA	71463

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19379

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 146 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JASON DORE

Mailing Address 2221 OLIVE ST

City	State	Zip Code
BATON ROUGE	LA	70806

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19337

Amount of Each Disbursement this Period

3710.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JASON DORE

Mailing Address 2221 OLIVE ST

City	State	Zip Code
BATON ROUGE	LA	70806

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19357

Amount of Each Disbursement this Period

3710.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JASON DORE

Mailing Address 2221 OLIVE ST

City	State	Zip Code
BATON ROUGE	LA	70806

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2014

Transaction ID : SB30B.19372

Amount of Each Disbursement this Period

7420.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7420.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 147 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. DAVID PATRICK DOYLE

Mailing Address 7177 HWY 115

City

ST LANDRY

State

LA

Zip Code

71367

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19327

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. DAVID PATRICK DOYLE

Mailing Address 7177 HWY 115

City

ST LANDRY

State

LA

Zip Code

71367

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		17		2014

Transaction ID : SB30B.19328

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. JORDAN ELSBURYMailing Address 530 LAKELAND DRIVE
SUITE 215

City

BATON ROUGE

State

LA

Zip Code

70802

Purpose of Disbursement

PAYROLL

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19338

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 148 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JORDAN ELSBURYMailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19358

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. KAITLIN O. FORANMailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19339

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. KAITLIN O. FORANMailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19359

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 149 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. STEPHANIE GARDNER

Mailing Address 3645 GLADIOLA CT APT G

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19388

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. STEPHANIE GARDNER

Mailing Address 3645 GLADIOLA CT APT G

City	State	Zip Code
BATON ROUGE	LA	70808

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19389

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. GEORGIA REPUBLICAN PARTY

Mailing Address P. O. BOX 550008

City	State	Zip Code
ATLANTA	GA	30355

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19062 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2014

Transaction ID : SB30B.19063

Amount of Each Disbursement this Period

31257.86

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

32257.86

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 150 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. GEORGIA REPUBLICAN PARTY

Mailing Address P. O. BOX 550008

City	State	Zip Code
ATLANTA	GA	30355

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19045 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2014

Transaction ID : SB30B.19046

Amount of Each Disbursement this Period

10333.56

Full Name (Last, First, Middle Initial)

B. HUNTER HALL

Mailing Address 38129 SPRINGWOOD AVE

City	State	Zip Code
PRARIEVILLE	LA	70769

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19340

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HUNTER HALL

Mailing Address 38129 SPRINGWOOD AVE

City	State	Zip Code
PRARIEVILLE	LA	70769

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19360

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10333.56

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 151 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. ASHLYN HEMINGWAY

Mailing Address 41561 RUE MAISON

City	State	Zip Code
PONCHATOULA	LA	70454

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19322

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. ASHLYN HEMINGWAY

Mailing Address 41561 RUE MAISON

City	State	Zip Code
PONCHATOULA	LA	70454

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19323

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. JACK HERETIK

Mailing Address 396 SANDHURST ROAD

City	State	Zip Code
AKRON	OH	44333

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19341

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 152 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JACK HERETIK

Mailing Address 396 SANDHURST ROAD

City	State	Zip Code
AKRON	OH	44333

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19361

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ERIN HUFFAKER

Mailing Address 3858 SOUTHPASS AVE

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19342

Amount of Each Disbursement this Period

1500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. ERIN HUFFAKER

Mailing Address 3858 SOUTHPASS AVE

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19362

Amount of Each Disbursement this Period

1500.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 153 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. ERIN HUFFAKER

Mailing Address 3858 SOUTHPASS AVE

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	20	/	2014

Transaction ID : SB30B.19330

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. ILLINOIS REPUBLICAN PARTY

Mailing Address P.O. BOX 64897

City	State	Zip Code
CHICAGO	IL	60664

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19041 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2014

Transaction ID : SB30B.19042

Amount of Each Disbursement this Period

8894.51

Full Name (Last, First, Middle Initial)

C. INDIANA REPUBLICAN STATE COMMITTEE, INC.

Mailing Address 47 S. MERIDIAN ST. SUITE 200

City	State	Zip Code
INDIANAPOLIS	IN	46204

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19010 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	24	/	2014

Transaction ID : SB30B.19011

Amount of Each Disbursement this Period

1461.54

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

13356.05

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 154 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. INDIANA REPUBLICAN STATE COMMITTEE, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	22	/	2014

Mailing Address 47 S. MERIDIAN ST. SUITE 200

Transaction ID : SB30B.19065

City INDIANAPOLIS State IN Zip Code 46204

Amount of Each Disbursement this Period

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19064 INKINDCategory/
Type

1461.54

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. INSPERITY PAYROLL SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Mailing Address 19001 CRESCENT SPRINGS DRIVE

Transaction ID : SB30B.19331

Amount of Each Disbursement this Period

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement
PAYROLL SERVICES/TAX(SEE MEMO ENTRIES)Category/
Type

25278.51

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. INSPERITY PAYROLL SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Mailing Address 19001 CRESCENT SPRINGS DRIVE

Transaction ID : SB30B.19332

Amount of Each Disbursement this Period

City KINGWOOD State TX Zip Code 77339

Purpose of Disbursement
PAYROLL TAXESCategory/
Type

1826.84

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

26740.05

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 155 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. INSPERITY PAYROLL SERVICES

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City	State	Zip Code
KINGWOOD	TX	77339

Purpose of Disbursement
PAYROLL SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19333

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. INSPERITY PAYROLL SERVICES

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City	State	Zip Code
KINGWOOD	TX	77339

Purpose of Disbursement
PAYROLL SERVICES/TAX(SEE MEMO ENTRIES)

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19351

Amount of Each Disbursement this Period

25275.51

Full Name (Last, First, Middle Initial)

C. INSPERITY PAYROLL SERVICES

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City	State	Zip Code
KINGWOOD	TX	77339

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19352

Amount of Each Disbursement this Period

1823.84

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

25275.51

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 156 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. INSPERITY PAYROLL SERVICES

Mailing Address 19001 CRESCENT SPRINGS DRIVE

City	State	Zip Code
KINGWOOD	TX	77339

Purpose of Disbursement
PAYROLL SERVICES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19353

Amount of Each Disbursement this Period

75.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. KIMBERLY JANCAMailing Address 530 LAKELAND DRIVE
SUITE 215

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19343

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. KIMBERLY JANCAMailing Address 530 LAKELAND DRIVE
SUITE 215

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19363

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 157 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MICHAEL MAHFOUZ

Mailing Address 1922 BROADWAY APT A

City	State	Zip Code
NEW ORLEANS	LA	70118

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19382

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. MICHAEL MAHFOUZ

Mailing Address 1922 BROADWAY APT A

City	State	Zip Code
NEW ORLEANS	LA	70118

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19383

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. MARYLAND REPUBLICAN STATE CENTRAL COMMITTEE

Mailing Address P.O. BOX 631

City	State	Zip Code
ANNAPOLIS	MD	21404

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19022 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19024

Amount of Each Disbursement this Period

672.81

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1172.81

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 158 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MARYLAND REPUBLICAN STATE CENTRAL COMMITTEE

Mailing Address P.O. BOX 631

City	State	Zip Code
ANNAPOLIS	MD	21404

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-26603 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		18		2014

Transaction ID : SB30B.26604

Amount of Each Disbursement this Period

2233.75

Full Name (Last, First, Middle Initial)

B. STEPHANIE MATT

Mailing Address 14232 COTTINGHAM COURT

City	State	Zip Code
BATON ROUGE	LA	70817

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19390

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. STEPHANIE MATT

Mailing Address 14232 COTTINGHAM COURT

City	State	Zip Code
BATON ROUGE	LA	70817

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19391

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2733.75

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 159 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MICHIGAN REPUBLICAN PARTY

Mailing Address 520 SEYMOUR AVENUE

City
LANSINGState
MIZip Code
48933Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-22605 INKIND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	18	/	2014

Transaction ID : SB30B.26607

Amount of Each Disbursement this Period

27800.41

Full Name (Last, First, Middle Initial)

B. JONAH MUMPHREY

Mailing Address 11335 ARCHERY DR

City
BATON ROUGEState
LAZip Code
70815Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	28	/	2014

Transaction ID : SB30B.19344

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JONAH MUMPHREY

Mailing Address 11335 ARCHERY DR

City
BATON ROUGEState
LAZip Code
70815Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	12	/	2014

Transaction ID : SB30B.19364

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

27800.41

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 160 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. NEW HAMPSHIRE REPUBLICAN STATE COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Mailing Address 10 WATER STREET

Transaction ID : SB30B.19006

City	State	Zip Code
CONCORD	NH	03301

Amount of Each Disbursement this Period

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19005 INKINDCategory/
Type

6307.17

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. NEW JERSEY REPUBLICAN STATE COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

Mailing Address 28 WEST STATE STREET SUITE 319

Transaction ID : SB30B.18993

Amount of Each Disbursement this Period

City	State	Zip Code
TRENTON	NJ	08608

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-18992 INKINDCategory/
Type

2937.26

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. NEW JERSEY REPUBLICAN STATE COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		10		2014

Mailing Address 28 WEST STATE STREET SUITE 319

Transaction ID : SB30B.19036

Amount of Each Disbursement this Period

City	State	Zip Code
TRENTON	NJ	08608

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19035 INKINDCategory/
Type

2937.26

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

12181.69

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 161 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. GARY SPENCER NICHOLSMailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19345

Amount of Each Disbursement this Period

1	9	1	6	.	6	7
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GARY SPENCER NICHOLSMailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19365

Amount of Each Disbursement this Period

1	9	1	6	.	6	7
---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. NORTH CAROLINA REPUBLICAN PARTY

Mailing Address 1506 HILLSBOROUGH STREET

City RALEIGH State NC Zip Code 27605

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19015 INKIND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19016

Amount of Each Disbursement this Period

2	7	8	0	.	4	8
---	---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2	7	8	0	.	4	8
---	---	---	---	---	---	---

2	7	8	0	.	4	8
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 162 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

Mailing Address 211 S. FIFTH STREET

City	State	Zip Code
COLUMBUS	OH	43215

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19020 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SB30B.19021

Amount of Each Disbursement this Period

6089.01

Full Name (Last, First, Middle Initial)

B. REPUBLICAN FEDERAL COMMITTEE OF PENNSYLVANIA

Mailing Address 112 STATE STREET

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19033 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11	/	24	/	2014

Transaction ID : SB30B.19034

Amount of Each Disbursement this Period

14955.50

Full Name (Last, First, Middle Initial)

C. REPUBLICAN PARTY OF FLORIDA

Mailing Address 420 E. JEFFERSON STREET

City	State	Zip Code
TALLAHASSEE	FL	32301

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19000 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	02	/	2014

Transaction ID : SB30B.19001

Amount of Each Disbursement this Period

7331.33

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

28375.84

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 163 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. REPUBLICAN PARTY OF FLORIDA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Mailing Address 420 E. JEFFERSON STREET

Transaction ID : SB30B.19044

City	State	Zip Code
TALLAHASSEE	FL	32301

Amount of Each Disbursement this Period

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19043 INKINDCategory/
Type

21864.24

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. REPUBLICAN PARTY OF TEXAS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2014

Mailing Address 1108 LAVACA STREET, SUITE 500

Transaction ID : SB30B.19059

Amount of Each Disbursement this Period

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19058 INKINDCategory/
Type

10339.53

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. REPUBLICAN PARTY OF TEXAS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2014

Mailing Address 1108 LAVACA STREET, SUITE 500

Transaction ID : SB30B.19057

Amount of Each Disbursement this Period

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19056 INKINDCategory/
Type

11079.00

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

43282.77

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 164 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. REPUBLICAN PARTY OF TEXAS

Mailing Address 1108 LAVACA STREET, SUITE 500

City	State	Zip Code
AUSTIN	TX	78701

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19060 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2014

Transaction ID : SB30B.19061

Amount of Each Disbursement this Period

3806.63

Full Name (Last, First, Middle Initial)

B. REPUBLICAN PARTY OF VIRGINIA INC

Mailing Address 115 EAST GRACE STREET

City	State	Zip Code
RICHMOND	VA	23219

Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-19050 INKIND

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Transaction ID : SB30B.19051

Amount of Each Disbursement this Period

625.00

Full Name (Last, First, Middle Initial)

C. MS. SAMMI RUSHING

Mailing Address 34875 MOLLY DR.

City	State	Zip Code
DENHAM SPRINGS	LA	70706

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19384

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4681.63

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 165 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. MS. SAMMI RUSHING

Mailing Address 34875 MOLLY DR.

City	State	Zip Code
DENHAM SPRINGS	LA	70706

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19385

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. KYLIE SMITH

Mailing Address 151 HWY 104

City	State	Zip Code
OBERLIN	LA	70655

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19376

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. KYLIE SMITH

Mailing Address 151 HWY 104

City	State	Zip Code
OBERLIN	LA	70655

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19377

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 166 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JEFFREY BRANT STIDHAM

Mailing Address 13322 BRIARGROVE DRIVE

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19346

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. JEFFREY BRANT STIDHAM

Mailing Address 13322 BRIARGROVE DRIVE

City	State	Zip Code
BATON ROUGE	LA	70810

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19366

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. JOHN AUSTIN STUKINSMailing Address 530 LAKELAND DRIVE
SUITE 215

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19347

Amount of Each Disbursement this Period

1750.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 167 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JOHN AUSTIN STUKINSMailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19367

Amount of Each Disbursement this Period

1750.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. TARGETED CREATIVE COMMUNICATIONS, INC.

Mailing Address 106 S COLUMBUS STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		20		2014

Transaction ID : SB30B.19396

Amount of Each Disbursement this Period

12818.00

Full Name (Last, First, Middle Initial)

C. TARGETED CREATIVE COMMUNICATIONS, INC.

Mailing Address 106 S COLUMBUS STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Transaction ID : SB30B.19397

Amount of Each Disbursement this Period

5178.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17996.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 168 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. TARGETED CREATIVE COMMUNICATIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Category/
Type**Transaction ID : SB30B.19398**

Amount of Each Disbursement this Period

13829.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. TARGETED CREATIVE COMMUNICATIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Category/
Type**Transaction ID : SB30B.19399**

Amount of Each Disbursement this Period

37586.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. TARGETED CREATIVE COMMUNICATIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Category/
Type**Transaction ID : SB30B.19400**

Amount of Each Disbursement this Period

37586.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

89001.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 169 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. TARGETED CREATIVE COMMUNICATIONS, INC.

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Transaction ID : SB30B.19401

Amount of Each Disbursement this Period

37586.00

Full Name (Last, First, Middle Initial)

B. TARGETED CREATIVE COMMUNICATIONS, INC.

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2014

Transaction ID : SB30B.19402

Amount of Each Disbursement this Period

4580.00

Full Name (Last, First, Middle Initial)

C. TARGETED CREATIVE COMMUNICATIONS, INC.

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2014

Transaction ID : SB30B.19403

Amount of Each Disbursement this Period

20500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

62666.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 170 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. TARGETED CREATIVE COMMUNICATIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2014

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Category/
Type**Transaction ID : SB30B.19404**

Amount of Each Disbursement this Period

29574.00

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. TARGETED CREATIVE COMMUNICATIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2014

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Category/
Type**Transaction ID : SB30B.19405**

Amount of Each Disbursement this Period

33778.00

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. TARGETED CREATIVE COMMUNICATIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2014

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Category/
Type**Transaction ID : SB30B.19406**

Amount of Each Disbursement this Period

7862.00

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

71214.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 171 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. TARGETED CREATIVE COMMUNICATIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2014

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Category/
Type**Transaction ID : SB30B.19407**

Amount of Each Disbursement this Period

20500.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. TARGETED CREATIVE COMMUNICATIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2014

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Category/
Type**Transaction ID : SB30B.19408**

Amount of Each Disbursement this Period

33778.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. TARGETED CREATIVE COMMUNICATIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Mailing Address 106 S COLUMBUS STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
VOLUNTEER EXEMPT MAIL

Candidate Name

Category/
Type**Transaction ID : SB30B.19409**

Amount of Each Disbursement this Period

20500.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

74778.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 172 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. JACOB C TAYLOR

Mailing Address 7707 LOTUS LANE

City
SHREVEPORTState
LAZip Code
71108Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19371

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. STEPHEN TAYLOR

Mailing Address 601 ROSEMEADE CIR

City
SHREVEPORTState
LAZip Code
71111Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19348

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STEPHEN TAYLOR

Mailing Address 601 ROSEMEADE CIR

City
SHREVEPORTState
LAZip Code
71111Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

Transaction ID : SB30B.19392

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 173 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. STEPHEN TAYLOR

Mailing Address 601 ROSEMEADE CIR

City
SHREVEPORTState
LAZip Code
71111Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19368

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. STEPHEN TAYLOR

Mailing Address 601 ROSEMEADE CIR

City
SHREVEPORTState
LAZip Code
71111Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2014

Transaction ID : SB30B.19393

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. TENNESSEE REPUBLICAN PARTY FEDERAL ELECTION ACCOUNTMailing Address 2424 21ST AVENUE
SUITE 200City
NASHVILLEState
TNZip Code
37212Purpose of Disbursement
SEE LINE 12 TRANS ID SB12-18984 INKIND

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		03		2014

Transaction ID : SB30B.18986

Amount of Each Disbursement this Period

1794.16

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2294.16

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 174 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. BRIENNA TRAHAN

Mailing Address 530 LAKELAND DR

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SB30B.19325

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. BRIENNA TRAHAN

Mailing Address 530 LAKELAND DR

City	State	Zip Code
BATON ROUGE	LA	70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	16	/	2014

Transaction ID : SB30B.19326

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. TAYLOR TRAVERS

Mailing Address 83261 PRESS SHARP ROAD

City	State	Zip Code
BUSH	LA	70431

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SB30B.19410

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 175 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. TAYLOR TRAVERS

Mailing Address 83261 PRESS SHARP ROAD

City BUSH	State LA	Zip Code 70431
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Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19411

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. JR MICHAEL J VIZZA

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT	State LA	Zip Code 71106
--------------------	-------------	-------------------

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		01		2014

Transaction ID : SB30B.19380

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. JR MICHAEL J VIZZA

Mailing Address 604 LOCH RIDGE DR

City SHREVEPORT	State LA	Zip Code 71106
--------------------	-------------	-------------------

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2014

Transaction ID : SB30B.19381

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 176 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. RACHEL VIZZAMailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19349

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RACHEL VIZZAMailing Address 530 LAKELAND DRIVE
SUITE 215

City BATON ROUGE State LA Zip Code 70802

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		12		2014

Transaction ID : SB30B.19369

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. KRISTY L. WILKINSON

Mailing Address 822 LOUISIANA AVE APT 822B

City NEW ORLEANS State LA Zip Code 70115

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		28		2014

Transaction ID : SB30B.19350

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 177 OF 187

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

Full Name (Last, First, Middle Initial)

A. KRISTY L. WILKINSON

Mailing Address 822 LOUISIANA AVE APT 822B

City
NEW ORLEANSState
LAZip Code
70115Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2014

Transaction ID : SB30B.19370

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. TAMMY YORK

Mailing Address 9731 SNYDER RD

City
SHREVEPORTState
LAZip Code
71129Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SB30B.19394

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. TAMMY YORK

Mailing Address 9731 SNYDER RD

City
SHREVEPORTState
LAZip Code
71129Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2014

Transaction ID : SB30B.19395

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

500.00

656665.57

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 178 OF 187

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JAMESTOWN ASSOCIATES

Nature of Debt (Purpose):

FEA VOLUNTEER MASS MAIL

Mailing Address 5 MAPLETON ROAD
SUITE 300City State Zip Code
PRINCETON NJ 08540

Outstanding Balance Beginning This Period

3800.00

Transaction ID : SD10.5463

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3800.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

3800.00

2) **TOTALS** This Period (last page this line number only)..... ►

3800.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

3800.00

SCHEDULE F (FEC Form 3X)
**ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

PAGE 179 OF 187

FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) REPUBLICAN PARTY OF LOUISIANA			
Has your committee been designated to make coordinated expenditures by a political party committee? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If YES, name the designating committee:		Full Name of Subordinate Committee Mailing Address City _____ State _____ ZIP Code _____	

Full Name (Last, First, Middle Initial) of Each Payee AIRNET			Purpose of Expenditure INKIND: VOTER PHONES ADVOCACY		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type		
Mailing Address PO BOX 11181			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM 12</div> <div style="border: 1px solid black; padding: 2px;">DD 17</div> <div style="border: 1px solid black; padding: 2px;">YYYY 2014</div> </div>				
City CHATTANOOGA		State TN		Zip Code 37401			
Name of Federal Candidate Supported WILLIAM CASSIDY		Office Sought:		<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: LA District: 00	
Aggregate General Election Expenditure for this Candidate ►			<div style="border: 1px solid black; width: 200px; height: 20px; display: flex; justify-content: flex-end; align-items: center; padding-right: 5px;">7287.58</div>				
Transaction ID : SF.26568							

Full Name (Last, First, Middle Initial) of Each Payee PRINTING TECH			Purpose of Expenditure INKIND: PRINTING: DOOR HANGERS		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type		
Mailing Address 11930 HARRELL'S FERRY ROAD			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM 12</div> <div style="border: 1px solid black; padding: 2px;">DD 09</div> <div style="border: 1px solid black; padding: 2px;">YYYY 2014</div> </div>				
City BATON ROUGE		State LA		Zip Code 70816-2368			
Name of Federal Candidate Supported WILLIAM CASSIDY		Office Sought:		<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: LA District: 00	
Aggregate General Election Expenditure for this Candidate ►			<div style="border: 1px solid black; width: 200px; height: 20px; display: flex; justify-content: flex-end; align-items: center; padding-right: 5px;">4761.28</div>				
Transaction ID : SF.26570							

Full Name (Last, First, Middle Initial) of Each Payee			Purpose of Expenditure		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> Category/Type		
Mailing Address			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM</div> <div style="border: 1px solid black; padding: 2px;">DD</div> <div style="border: 1px solid black; padding: 2px;">YYYY</div> </div>				
City		State		Zip Code			
Name of Federal Candidate Supported		Office Sought:		<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential		State: _____ District: _____	
Aggregate General Election Expenditure for this Candidate ►			<div style="border: 1px solid black; width: 200px; height: 20px; display: flex; justify-content: flex-end; align-items: center; padding-right: 5px;"></div>				

SUBTOTAL of Expenditures This Page (optional)..... ►		<div style="border: 1px solid black; width: 150px; height: 20px; display: flex; justify-content: flex-end; align-items: center; padding-right: 5px;">7287.58</div>	
TOTAL This Period (last page this line number only)..... ►		<div style="border: 1px solid black; width: 150px; height: 20px; display: flex; justify-content: flex-end; align-items: center; padding-right: 5px;">7287.58</div>	

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 180 OF 187

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 REPUBLICAN PARTY OF LOUISIANA

NAME OF ACCOUNT
 REPUBLICAN PARTY OF LOUISIANA

DATE OF RECEIPT

M M / D D / Y Y Y Y Y
 11 / 24 / 2014

TOTAL AMOUNT TRANSFERRED

7505.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7505.00

Transaction ID : H3.26599

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred).....

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 181 OF 187

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)
 REPUBLICAN PARTY OF LOUISIANA

NAME OF ACCOUNT
 REPUBLICAN PARTY OF LOUISIANA

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y
 12 / 01 / 2014

TOTAL AMOUNT TRANSFERRED

334.47

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

334.47

Transaction ID : H3.26600

ii) Generic Voter Drive

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Fundraising

v) Direct Candidate Support (List Activity or Event Identifier)

a)

b)

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

7839.47

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred).....

7839.47

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 182 OF 187

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) ACADIAN RELIGIOUS & GIFTS			Transaction ID : H4.19067		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2819 JOHNSTON ST					Allocated Activity or Event Year-To-Date 541810.10	
City LAFAYETTE	State LA	Zip Code 70503			Date 11 / 20 / 2014	
Purpose of Disbursement: UTILITIES						
Activity or Event Identifier: Administrative			Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
82.14			309.01			391.15

B. Full Name (Last, First, Middle Initial) ACADIAN RELIGIOUS & GIFTS			Transaction ID : H4.19068		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2819 JOHNSTON ST					Allocated Activity or Event Year-To-Date 542253.56	
City LAFAYETTE	State LA	Zip Code 70503			Date 11 / 25 / 2014	
Purpose of Disbursement: UTILITIES						
Activity or Event Identifier: Administrative			Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
93.13			350.33			443.46

C. Full Name (Last, First, Middle Initial) ACCESS COMMUNICATIONS LLC			Transaction ID : H4.19070		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 1672					Allocated Activity or Event Year-To-Date 542374.41	
City GONZALES	State LA	Zip Code 70707			Date 11 / 25 / 2014	
Purpose of Disbursement: EQUIPMENT MAINTENANCE: PHONES						
Activity or Event Identifier: Administrative			Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
25.38			95.47			120.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
200.65		754.81		955.46

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 183 OF 187

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) Transaction ID : H4.19071 ALFORD & DOVE PROPERTIES LLC			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 2817					
City HOUMA	State LA	Zip Code 70361			
Purpose of Disbursement: RENT			Allocated Activity or Event Year-To-Date 543024.41		
Activity or Event Identifier: Administrative		Category/ Type	Date 12 / 01 / 2014		
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
136.50			513.50		650.00

B. Full Name (Last, First, Middle Initial) Transaction ID : H4.19072 CHARLES ROBERT CARTER PROPERTIES			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12030 LAKELAND BLVD SUITE 101					
City BATON ROUGE	State LA	Zip Code 70809			
Purpose of Disbursement: RENT			Allocated Activity or Event Year-To-Date 546555.48		
Activity or Event Identifier: Administrative		Category/ Type	Date 12 / 01 / 2014		
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
741.52			2789.55		3531.07

C. Full Name (Last, First, Middle Initial) Transaction ID : H4.19077 EVANGELINE OAK LLC			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO BOX 1026					
City MADISONVILLE	State LA	Zip Code 70447			
Purpose of Disbursement: RENT			Allocated Activity or Event Year-To-Date 547555.48		
Activity or Event Identifier: Administrative		Category/ Type	Date 12 / 01 / 2014		
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
210.00			790.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1088.02		4093.05		5181.07

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 184 OF 187

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) LOGIC NATION, INC		Transaction ID : H4.19078		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 910 PIERREMONT ROAD SUITE 216				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City SHREVEPORT	State LA	Zip Code 71106		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: RENT				Allocated Activity or Event Year-To-Date 548555.48	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 01 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00			790.00		1000.00

B. Full Name (Last, First, Middle Initial) NORGATE INVESTORS C/O 1ST LAKE COMMERCIAL		Transaction ID : H4.19079		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 3925 N I-10 SERVICE ROAD W SUITE 130				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City METAIRIE	State LA	Zip Code 70002		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: RENT				Allocated Activity or Event Year-To-Date 550622.98	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 01 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
434.18			1633.32		2067.50

C. Full Name (Last, First, Middle Initial) REES REALTY CORPORATION		Transaction ID : H4.19082		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PMB 540 2851 JOHNSTON ST				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City LAFAYETTE	State LA	Zip Code 70503		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: RENT				Allocated Activity or Event Year-To-Date 551822.98	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 01 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00			948.00		1200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
896.18		3371.32		4267.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 185 OF 187

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) RRPEC		Transaction ID : H4.19083		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 12445					
City ALEXANDRIA	State LA	Zip Code 71315			
Purpose of Disbursement: RENT				Allocated Activity or Event Year-To-Date 552322.98	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 01 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
105.00			395.00		500.00

B. Full Name (Last, First, Middle Initial) CIT TECHNOLOGY		Transaction ID : H4.19073		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 550599					
City JACKSONVILLE	State FL	Zip Code 32255			
Purpose of Disbursement: EQUIPMENT LEASE: COPIER				Allocated Activity or Event Year-To-Date 552956.07	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 08 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
132.95			500.14		633.09

C. Full Name (Last, First, Middle Initial) COLLIN RICHIE PHOTOGRAPHY		Transaction ID : H4.19076		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 162 LEE DR SUITE B					
City BATON ROUGE	State LA	Zip Code 70808			
Purpose of Disbursement: PHOTOGRAPHY SERVICES				Allocated Activity or Event Year-To-Date 553506.07	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 08 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
115.50			434.50		550.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
353.45		1329.64		1683.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 186 OF 187

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) OFFICE DEPOT		Transaction ID : H4.19080		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P.O. BOX 9020					
City DES MOINES	State IA	Zip Code 50368			
Purpose of Disbursement: OFFICE SUPPLIES				Allocated Activity or Event Year-To-Date 553555.07	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 08 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
10.29			38.71		49.00

B. Full Name (Last, First, Middle Initial) CIT TECHNOLOGY		Transaction ID : H4.19074		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO BOX 550599					
City JACKSONVILLE	State FL	Zip Code 32255			
Purpose of Disbursement: EQUIPMENT LEASE: COPIER				Allocated Activity or Event Year-To-Date 554188.16	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 12 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
132.95			500.14		633.09

C. Full Name (Last, First, Middle Initial) ACADIAN RELIGIOUS & GIFTS		Transaction ID : H4.19069		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2819 JOHNSTON ST					
City LAFAYETTE	State LA	Zip Code 70503			
Purpose of Disbursement: UTILITIES				Allocated Activity or Event Year-To-Date 554520.23	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 18 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
69.73			262.34		332.07

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
212.97		801.19		1014.16

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X)**DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 187 OF 187

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF LOUISIANA

A. Full Name (Last, First, Middle Initial) CLECO POWER LLC		Transaction ID : H4.19075		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO BOX 660228				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City DALLAS	State TX	Zip Code 75266		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: UTILITIES				Allocated Activity or Event Year-To-Date 554746.47	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 18 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.51			178.73		226.24

B. Full Name (Last, First, Middle Initial) OFFICE DEPOT		Transaction ID : H4.19081		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address P.O. BOX 9020				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City DES MOINES	State IA	Zip Code 50368		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: OFFICE SUPPLIES				Allocated Activity or Event Year-To-Date 554978.99	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 21 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
48.83			183.69		232.52

C. Full Name (Last, First, Middle Initial)				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City	State	Zip Code		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement:				Allocated Activity or Event Year-To-Date	
Activity or Event Identifier:		Category/ Type		Date	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
96.34		362.42		458.76

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
2847.61	10712.43	13560.04